

**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:

11/25/2016

Document Number:

679901973**FIELD INSPECTION FORM**

Loc ID 304006 Inspector Name: Welsh, Brian On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 24045Name of Operator: ROBERTSON* DEXTERAddress: 13006 HIGHWAY 34City: YUMA State: CO Zip: 80759**Status Summary:**

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

Findings:8 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name | Phone | Email | Comment |
|-------------------|----------------|-------------------------|---------|
| Robertson, Dexter | (970) 848-2435 | brian.welsh@state.co.us | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------|
| 253916 | WELL | DM | 03/08/1996 | GW | 125-07794 | ROBERTSON 13-31 | DM |

General Comment:

Location

| | | | |
|--------------------|---------------------------|-------|--|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Two track through pasture | | |
| Corrective Action: | | Date: | |

Overall Good: ☒

| | | | |
|----------------------|---|-------|--|
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | No lease sign at wellhead. Install lease sign | | |
| Corrective Action: | | Date: | |

| | | |
|---------------------------|--|-------------|
| Emergency Contact Number: | | |
| Comment: | | |
| Corrective Action: | | Date: _____ |

| | | | |
|---------------------------|---|-------|--|
| Good Housekeeping: | | | |
| Type | DEBRIS | | |
| Comment: | Propane tank, master valve and old electric boxes on location | | |
| Corrective Action: | | Date: | |

Overall Good: ☐

| | | | |
|----------------|------|--------|--|
| Spills: | | | |
| Type | Area | Volume | |

In Containment: No

Comment: _____

☐ Multiple Spills and Releases?

| | | | |
|--------------------|--|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Pump Jack | # 1 | | |
| Comment: | Jensen unit. Prime mover has been disconnected from electric panel | | |
| Corrective Action: | | Date: | |
| Type: Other | # 1 | | |
| Comment: | Propane tank has fittings to be connected to casing and filled with well gas | | |
| Corrective Action: | | Date: | |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|--|----------|---------------|---------|-----------------------|
| PRODUCED WATER | 1 | <50 BBLs | BV FIBERGLASS | | 40.094840,-102.564350 |
| Comment: | Buried fiberglass tank 20' south of wellhead | | | | |
| Corrective Action: | | | | | Date: |

Paint

| | |
|------------------|--|
| Condition | |
| Other (Content) | |
| Other (Capacity) | |

| | | | | | |
|--------------------|----------|---------------------|---------------------|-------------|-------|
| Other (Type) | | | | | |
| Berms | | | | | |
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance | |
| | | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |
| Venting: | | | | | |
| Yes/No | | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |
| Flaring: | | | | | |
| Type | | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |

| Inspected Facilities | | | | | | | | | |
|----------------------|---|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID: | 253916 | Type: | WELL | API Number: | 125-07794 | Status: | DM | Insp. Status: | DM |
| Producing Well | | | | | | | | | |
| Comment: | Well is SI at time of inspection. Used as domestic well. Leak was detected on casing head | | | | | | | | |
| 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 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Other | Pass | Compaction | Pass | | | |

Comment: [Location has vegetation growth and is in pasture](#)

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 |
|--------------|----------------------|---|
| 679901973 | INSPECTION SUBMITTED | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4013063 |