

**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:

05/04/2017

Submitted Date:

05/04/2017

Document Number:

673715380

FIELD INSPECTION FORMLoc ID _____ Inspector Name: _____ On-Site Inspection
320794 _____ 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: 10548

Name of Operator: HRM RESOURCES II LLC

Address: 410 17TH STREET #1600

City: DENVER State: CO Zip: 80202

Findings:

19 Number of Comments

1 Number of Corrective Actions

 Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Akers, John Austin	(303) 550-1877	aakers@bisonog.com	Principal agent
Hutson, L. Roger	(303) 893-6621	lrhutson@hrmres.com	
Wenk, Abigal	720-644-6997	awenk@bisonog.com	Regulatory Manager
Pape, Terry	(970) 768-5700	tpape@hrmres.com	
Prohaska, April	(303) 996-8697	aprohaska@hrmres.com	
Gonzales, David	720-644-6997	dgonzales@bisonog.com	President and COO

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
278458	WELL	PR	02/01/2007	GW	005-07108	FREUND 42-21	SI

General Comment:

Form 10 in process.

Location

Overall Good:

Signs/Marker:			
Type	WELLHEAD		
Comment:	Bison		
Corrective Action:		Date:	
Type	BATTERY		
Comment:	Still HRM on the 2 tank battery signs (see attached photos). Form 10 still in process.		
Corrective Action:		Date:	
Type	CONTAINERS		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:			
Comment:	303-481-2844		
Corrective Action:		Date:	_____

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment: _____

Multiple Spills and Releases?

Fencing/:			
Type	TANK BATTERY		
Comment:	barbed wire, needs maintenance on south side of tanks		
Corrective Action:		Date:	
Type	SEPARATOR		
Comment:	barbed wire		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	steel panels		
Corrective Action:		Date:	

Equipment:			corrective date
Type: Plunger Lift	# 1		
Comment:	530 psi on tubing and 500 psi on casing, motor valve, solar panel		
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		

Comment:		Date:	
Corrective Action:		Date:	
Type: Horizontal Heater Treater	# 1		
Comment:	bermed, GPS 39.60307, -104.43378		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	OTHER			
Comment:	pipe on top of pit is open on the end and needs a bird protector				
Corrective Action:					Date:

Paint

Condition	
Other (Content)	
Other (Capacity)	48 BBLs
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Comment:	inside berms with 300 BBL crude oil tank				
Corrective Action:				Date:	
Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	1	300 BBLs	STEEL AST		39.602870,-104.435770
Comment:	Enardo valve, bull plugs on all valves				
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Comment:					
Corrective Action:				Date:	
Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	1	OTHER	STEEL AST		
Comment:					
Corrective Action:					Date:

Paint

Condition	Adequate
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Other (Content)	
Other (Capacity) 210 BBLs	
Other (Type)	

Berms

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

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Location Construction

Location ID: 278458 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: 278458 Type: WELL API Number: 005-07108 Status: PR Insp. Status: SI

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment:

Corrective Action:

Date: _____

Reclamation - Storm Water - Pit

Interim Reclamation:

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

Land Use: _____

Comment: pasture, Kiowa Creek ~1800' west of well location, stock pond ~175' north of well location, house ~1500' NE of well, within a Designated Basin and a Designated Groundwater Management Area

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 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: <input type="text"/>						
Corrective Action: <input type="text"/>					Date: _____	
Pits: <input checked="" type="checkbox"/> NO SURFACE INDICATION OF PIT						

Optical Gas Imaging Survey

Survey Type: Routine

Current Operations: Production Workover Flowback Referred to APCD

GPS(entrance of location): Lat: _____ Long: _____

Wind: Light Speed: _____ (mph) Direction From: NW Weather: Clear Temperature: 61 (F)

Assisting Staff: _____ Camera #: _____

Visible Smoke Referred to CDPHE

Times Surveyed

Equipment Surveyed

Time Survey Start	AM/PM	Time Survey End	AM/PM
11:05	AM	11:15	AM

Equipment
Water Tank(s)
Separation Equipment
Wellhead(s)
Oil Tank(s)

Comment: Small leak at wellhead surface casing cap. Contacted Operator on 5/4/2017 and they will fix or isolate the leak.

Corrective Action: Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 605.d.

Date: 05/05/2017

Attached Documents

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

Document Num	Description	URL
673715388	HRM/Bison Freund 42-21	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4139591
673715389	Freund 42-21 Flir file	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4139592