

**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:

05/16/2017

Submitted Date:

05/22/2017

Document Number:

685303096

FIELD INSPECTION FORM

Loc ID 312116 Inspector Name: St John, William (Cal) On-Site Inspection 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: 10000
Name of Operator: BP AMERICA PRODUCTION COMPANY
Address: 380 AIRPORT RD
City: DURANGO State: CO Zip: 81303

Findings:

22 Number of Comments
0 Number of Corrective Actions
 Corrective Action Response Requested

Contact Information:

| Contact Name | Phone | Email | Comment |
|------------------|--------------|---------------------|---------------------------------------|
| Inspections, All | | SanJuanCOGCC@bp.com | SW Inspection Reports |
| Beebe, Sabre | 970-375-7530 | Sabre.Beebe@bp.com | SW Inspection Reports |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-----------------------|-------------|
| 214620 | WELL | IJ | 11/30/2016 | DSPW | 067-06224 | HOTT DISPOSAL (EPA) 1 | IJ |

General Comment:

[See link at end of report for path to downloadable pictures. Surface area and equipment inspection only.](#)

| Location | | | |
|--|--|--------|-----------------|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Dirt and gravel two track road. | | |
| Corrective Action: | | Date: | |
| Overall Good: <input type="checkbox"/> | | | |
| Signs/Marker: | | | |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | Sign and labels directly on tanks. | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | Sign mounted on outside of fiberglass building over wellhead. | | |
| Corrective Action: | | Date: | |
| Emergency Contact Number: | | | |
| Comment: | Operator contact information posted on wellhead and produced water tank signs. | | Date: _____ |
| Corrective Action: | | | |
| Overall Good: <input type="checkbox"/> | | | |
| Spills: | | | |
| Type | Area | Volume | |
| In Containment: No | | | |
| Comment: | | | |
| <input type="checkbox"/> Multiple Spills and Releases? | | | |
| Fencing/: | | | |
| Type | LOCATION | | |
| Comment: | Post and wire fencing. | | |
| Corrective Action: | | Date: | |
| Equipment: | | | |
| Type: Ancillary equipment | # 1 | | corrective date |
| Comment: | Telemetry equipment. | | |
| Corrective Action: | | Date: | |
| Type: Other | # 2 | | |
| Comment: | Riser and valve | | |
| Corrective Action: | | Date: | |
| Type: Other | # 1 | | |
| Comment: | Water can and valve set. | | |
| Corrective Action: | | Date: | |
| Type: Other | # 1 | | |
| Comment: | Steel building - Injection pump. | | |
| Corrective Action: | | Date: | |

| | | | |
|---------------------------|------------------------------------|--|-------|
| Type: Flow Line | # 1 | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Bird Protectors | # 4 | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Other | # 1 | | |
| Comment: | Steel building - Control room. | | |
| Corrective Action: | | | Date: |
| Type: Deadman # & Marked | # 2 | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Other | # 1 | | |
| Comment: | Fiberglass building over wellhead. | | |
| Corrective Action: | | | Date: |
| Type: Ancillary equipment | # 1 | | |
| Comment: | Electrical service equipment. | | |
| Corrective Action: | | | Date: |
| Type: Ancillary equipment | # 1 | | |
| Comment: | Wellhead. | | |
| Corrective Action: | | | Date: |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|--|----------|-----------|---------|--------|
| PRODUCED WATER | 1 | OTHER | PBV STEEL | | , |
| Comment: | Partially buried steel tank with metal containment ring. | | | | |
| Corrective Action: | | | | | Date: |

Paint

| | | |
|------------------|----------|--|
| Condition | Adequate | |
| Other (Content) | | |
| Other (Capacity) | 95 BBLS | |
| Other (Type) | | |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance | |
|--------------------|---|---------------------|---------------------|-------------|--------|
| Metal | Adequate | Walls Sufficient | Base Sufficient | Adequate | |
| Comment: | | | | | |
| Corrective Action: | | | | Date: | |
| Contents | # | Capacity | Type | Tank ID | SE GPS |
| PRODUCED WATER | 4 | 400 BBLS | HEATED STEEL AST | | , |
| Comment: | Above ground heated steel tank with metal containment ring. | | | | |
| Corrective Action: | | | | | Date: |

| | |
|------------------|----------|
| Paint | |
| Condition | Adequate |
| Other (Content) | |
| Other (Capacity) | |
| Other (Type) | |

| | | | | |
|--------------------|----------|---------------------|---------------------|-------------|
| Berms | | | | |
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| Metal | Adequate | Walls Sufficent | Base Sufficent | Adequate |
| Comment: | | | | |
| Corrective Action: | | | | Date: |

| | | | |
|--------------------|----|--|-------|
| Venting: | | | |
| Yes/No | NO | | |
| Comment: | | | |
| Corrective Action: | | | Date: |

| | | | |
|--------------------|--|--|-------|
| Flaring: | | | |
| Type | | | |
| Comment: | | | |
| Corrective Action: | | | Date: |

Inspected Facilities

Facility ID: 214620 Type: WELL API Number: 067-06224 Status: IJ Insp. Status: IJ

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

| | | | |
|------------|---|------------------------------|-----------------------------|
| Inj./Tube: | Pressure or inches of Hg _____ (e.g. 30 psig or -30" Hg) | Previous Test Pressure _____ | MPP _____ |
| TC: | Pressure or inches of Hg _____ | Previous Test Pressure _____ | Inj Zone: <u>MVRD</u> |
| Brhd: | Pressure or inches of Hg _____ | Previous Test Pressure _____ | Last MIT: <u>02/20/2014</u> |
| | | | AnnMTReq: _____ |

Comment:

Corrective Action: Date: _____

Method of Injection: _____

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment:

Corrective Action: Date: _____

Reclamation - Storm Water - Pit

Interim Reclamation:

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

Land Use: _____

Comment: Location has irrigated pasture to the N, S, and W. Another facility is off the E side of pad.

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 |
|------------------|-----------------|-------------------------|-----------------------|--|--------------------------|---|
| Gravel | Pass | Gravel | Pass | | | |
| Culverts | Pass | Culverts | Pass | | | |
| Compaction | Pass | Compaction | Pass | Material Handling And Spill Prevention | Pass | Containment ring around produced water tanks. |

Comment: [Stormwater BMPs appear to be functioning at time of inspection.](#)

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 |
|--------------|----------------------|---|
| 401289045 | INSPECTION SUBMITTED | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4152503 |
| 685303131 | Wellhead sign. | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4152466 |
| 685303132 | Location overview. | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4152467 |