

**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:

09/22/2017

Submitted Date:

09/22/2017

Document Number:

685303785

FIELD INSPECTION FORM

Loc ID 325933 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:

- 14 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Beebe, Sabre	970-375-7530	Sabre.Beebe@bp.com	SW Inspection Reports
Labowskie, Steve		steve.labowskie@state.co.us	COGCC
Inspections, All		SanJuanCOGCC@bp.com	SW Inspection Reports
Leonard, Mike		mike.leonard@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
215588	WELL	SI	02/01/1989	GW	067-07193	GURR FEDERAL GAS UNIT 1	SI

General Comment:

[See link at end of report for path to downloadable pictures.](#)

[Inspection completed as follow up to verify completed corrective actions and check compliance with May 2017 Flowline NTO.](#)

[At time of inspection there was not an electronic inventory record for this location.](#)

[Inspection report contains comment.](#)

Location			
Lease Road:			
Type	Access		
comment:	Dirt and gravel access road.		
Corrective ActionL			Date:
Overall Good: <input type="checkbox"/>			
Signs/Marker:			
Type	WELLHEAD		
Comment:	Corrective action completed.		
Corrective Action:			Date:
Emergency Contact Number:			
Comment:	Corrective action completed.		
Corrective Action:			Date: _____
Good Housekeeping:			
Type	UNUSED EQUIPMENT		
Comment:	Identified (4) unused risers. Flowline risers not LO/TO or marked are considered unused equipment.		
Corrective Action:			Date:
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:	Wellhead.		
Corrective Action:			Date:
Type: Flow Line	# 4		
Comment:	Unused - 3" steel riser at wellhead. (B) point unknown. Valve and bull plug. Unused - 3" steel riser at wellhead. (B) point unknown. Open ended hammer union. Unused - 3" steel riser on NE perimeter of location. (B) point unknown. Valve and plug. Unused - 1" steel riser in NE corner of location. (B) point unknown. Open ended.		
Corrective Action:			Date:
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:			Date:

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

Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 215588 Type: WELL API Number: 067-07193 Status: SI Insp. Status: SI

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment: SI - Successful MIT conducted 05/15/2013. SI status does not accurately reflect conditions at location. All production equipment has been removed with the exception of noted risers/flowlines. Well should be reported as TA.

Corrective Action: Date: _____

Reclamation - Storm Water - Pit

Interim Reclamation:

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

Land Use: _____

Comment: Rural residential properties. Location on ridgeline base with cut and fill slopes. Oak Brush and Pines along N and NE perimeter of location.

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:

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
685303790	Inspection pictures.	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4259368