

**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:

02/12/2018

Submitted Date:

02/12/2018

Document Number:

679904006**FIELD INSPECTION FORM**
 Loc ID 303296 Inspector Name: Welsh, Brian On-Site Inspection ☐ 2A Doc Num:
Operator Information:OGCC Operator Number: 10112Name of Operator: FOUNDATION ENERGY MANAGEMENT LLCAddress: 5057 KELLER SPRINGS RD STE 650City: ADDISON State: TX Zip: 75001**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
Grant, Rachael	918-585-1650 ext 212	regulatory@foundationenergy.com	
Costa, Ryan		ryan.costa@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
252839	WELL	SI	06/01/2017	GW	125-06715	DEVLIN 12-33	PA

General Comment:

(Final) Routine Inspection

LocationOverall Good: ☐

Emergency Contact Number:

Comment: Corrective Action: Date: Overall Good: ☐**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Equipment:**

corrective date

Type: Prime Mover

0

Comment: [Removed from location](#)Corrective Action: Date:

Type: Pump Jack

0

Comment: [Removed from location](#)Corrective Action: Date:

Type: Horizontal Separator

0

Comment: [Removed from location](#)Corrective Action: Date:

Type: Ancillary equipment

0

Comment: [Removed from location](#)Corrective Action: Date:

Type: Gas Meter Run

0

Comment: [Removed from location](#)Corrective Action: Date: **Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	0	OTHER	Open Top		39.668800,-102.193870	
Comment: Water tank removed from location						
Corrective Action: <input type="text"/>						Date: <input type="text"/>

PaintCondition: Other (Content)

Other (Capacity) 210bbbls

Other (Type) **Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
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Comment:					
Corrective Action:					Date: <div></div>
<u>Venting:</u>					
Yes/No					
Comment:					
Corrective Action:					Date: <div></div>
<u>Flaring:</u>					
Type					
Comment:					
Corrective Action:					Date: <div></div>

Inspected Facilities									
Facility ID:	252839	Type:	WELL	API Number:	125-06715	Status:	SI	Insp. Status:	PA

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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 Pass Pit mouse/rat holes, cellars backfilled Pass

Debris removed Pass No disturbance /Location never built In

Access Roads Regraded In Contoured In Culverts removed _____

Gravel removed In

Location and associated production facilities reclaimed In Locations, facilities, roads, recontoured In

Compaction alleviation In Dust and erosion control _____

Non cropland: Revegetated 80% In Cropland: perennial forage _____

Weeds present Pass Subsidence _____

1004.d. FINAL VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

Comment: Well has been plugged. Wellhead is cut, capped and covered. Equipment has been removed from location and ready for final reclamation. Final reclamation will be verified by reclamation specialist

Corrective Action: _____ Date _____

Overall Final Reclamation	In Process	Well Release on Active Location	<input type="checkbox"/>	Multi-Well Location	<input type="checkbox"/>
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