

**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:

06/14/2018

Submitted Date:

06/19/2018

Document Number:

685304889

FIELD INSPECTION FORM

Loc ID 325237 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: 31257
Name of Operator: FRITZLER RESOURCES INC
Address: P O BOX 114
City: FORT MORGAN State: CO Zip: 80701

Findings:

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

Contact Information:

| Contact Name | Phone | Email | Comment |
|------------------|----------------|----------------------------------|---------------------------------|
| Fritzler, Gene | (970) 867-9388 | gfritzler@bresnan.net | All Inspections |
| Labowskie, Steve | | steve.labowskie@state.co.us | COGCC |
| Leonard, Mike | | mike.leonard@state.co.us | |
| , Engineering | | dnr_cogccengineering@state.co.us | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 214374 | WELL | SI | 07/01/2017 | GW | 067-05786 | UTE B 1 | SI |

General Comment:

[Inspection completed as COGCC witness requirement for well P&A work.](#)

[This inspection does not alleviate requirement to complete any open corrective actions from previous inspections.](#)

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

| Location | | | |
|--|--|--------|------------------|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Dirt and gravel access road. Road is used by landowner as driveway access to primary residence. | | |
| Corrective ActionL | | | Date: |
| Overall Good: <input type="checkbox"/> | | | |
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | Metal sign at wellhead. Will be removed when below grade marker is in place. | | |
| Corrective Action: | | | Date: |
| Emergency Contact Number: | | | |
| Comment: | Operator contact information posted on wellhead sign. | | |
| Corrective Action: | | | Date: _____ |
| Good Housekeeping: | | | |
| Type | UNUSED EQUIPMENT | | |
| Comment: | Identified (4) risers. See equipment section of report. Flowline risers not LO/TO or marked are considered unused equipment. For unused, unmarked flowline risers 24 hrs to lock out tag out. 30 days to remove riser. | | |
| Corrective Action: | Comply with Rule 1105 for flow line abandonment. | | Date: 07/20/2018 |
| Overall Good: <input type="checkbox"/> | | | |
| Spills: | | | |
| Type | Area | Volume | |
| In Containment: No _____ | | | |
| Comment: _____ | | | |
| <input type="checkbox"/> Multiple Spills and Releases? | | | |
| Equipment: | | | |
| Type: Flow Line | # 2 | | corrective date |
| Comment: | 37.01547/-107.52533 Unused - 4" steel riser S of wellhead. (B) point unknown. End capped. Unused - 2" steel line S of wellhead. (B) point unknown. Valve bull plugged. | | |
| Corrective Action: | | | Date: |
| Type: Flow Line | # 1 | | |
| Comment: | Unused - 2" steel line at wellhead site. Steel line was uncovered and disconnected from wellhead during P&A work. (B) point unknown. | | |
| Corrective Action: | | | Date: |
| Type: Ancillary equipment | # 1 | | |
| Comment: | Wellhead. Wellhead will be cut off below grade and below grade marker installed. | | |
| Corrective Action: | | | Date: |
| Type: Flow Line | # 1 | | |
| Comment: | 37.01554/-107.52525 Unused - 4" steel riser S of wellhead. (B) point unknown. Valve end is not plugged or capped. | | |
| Corrective Action: | | | Date: |

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

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

Inspected Facilities

Facility ID: 214374 Type: WELL API Number: 067-05786 Status: SI Insp. Status: SI

Cement

Cement Contractor

Contractor Name: A Plus Well

Contractor Phone: _____

Surface Casing

Cement Volume (sx): _____

Circulate to Surface: _____

Cement Fall Back: _____

Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): _____

Good Return During Job: _____

Production Casing

Cement Volume (sx): _____

Good Return During Job: _____

Plugging Operations

Depth Plugs(feet range): _____

Cement Volume (sx): _____

Good Return During Job: _____

Cement Type: _____

Comment:

Cementing work completed.
Wellhead cutoff 5' below grade and below grade marker installed.
Casing and marker GPS location W37.01578/W107.52506.
(4) risers (see equipment section) remain on location and are to be abandoned as part of site reclamation work.

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 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: 06/15/2018 Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: Well plugging completed and below grade marker installed 6/14/2018. There are (4) steel risers on location that will require abandonment to complete facilities reclamation. This is scheduled to be completed as part of site reclamation work.

Well plugged Pass Pit mouse/rat holes, cellars backfilled Pass

Debris removed Pass No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed In 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 <input type="checkbox"/> | Multi-Well Location <input type="checkbox"/> |
|---------------------------|--|--|

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | Gravel | Pass | | | |
| Compaction | Pass | Compaction | Pass | | | |

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 |
|--------------|--------------------|---|
| 685304910 | Inspection photos. | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4498440 |