

FORM
INSPRev
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:

04/02/2019

Submitted Date:

04/02/2019

Document Number:

687904382**FIELD INSPECTION FORM**

Loc ID 326189 Inspector Name: Stewart, Joseph On-Site Inspection 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10000Name of Operator: BP AMERICA PRODUCTION COMPANYAddress: 1199 MAIN AVENUE SUITE 101City: DURANGO State: CO Zip: 81301**Status Summary:**

- THIS IS A FOLLOW UP INSPECTION
 FOLLOW UP INSPECTION REQUIRED
 NO FOLLOW UP INSPECTION REQUIRED

Findings:11 Number of Comments0 Number of Corrective Actions Corrective Action Response Requested

**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE**

Contact Information:

Contact Name	Phone	Email	Comment
Beebe, Sabre	970-779-9398	Sabre.Beebe@bpx.com	SW Inspection Reports
Inspections, All		SanJuanCOGCC@bp.com	All Inspections
Labowskie, Steve		steve.labowskie@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
216015	WELL	PR	04/14/2003	GW	067-07621	BROWN 32-6-10 1	PR

General Comment:

[This is an onsite inspection as required.](#)

Location				
Lease Road:				
	Type	Access		
	comment:	Gravel road across private property through gates.		
	Corrective Action:			Date:
Overall Good: <input type="checkbox"/>				
Signs/Marker:				
	Type	WELLHEAD		
	Comment:	Framed metal sign at entrance to location.		
	Corrective Action:			Date:
Emergency Contact Number:				
	Comment:	(970) 247-6916/911		
	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	WELLHEAD		
	Comment:	Cattle panels around wellhead.		
	Corrective Action:			Date:
	Type	SEPARATOR		
	Comment:	Cattle panels around separator and meter house.		
	Corrective Action:			Date:
Equipment:				
Type: Vertical Heated Separator	# 1			corrective date
	Comment:			
	Corrective Action:			Date:
Type: Gas Meter Run	# 1			
	Comment:			
	Corrective Action:			Date:
Type: Bird Protectors	# 1			
	Comment:	On separator stack.		
	Corrective Action:			Date:
Type: Ancillary equipment	# 1			
	Comment:	Wellhead with PVC bradenhead access.		
	Corrective Action:			Date:

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

Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 216015 Type: WELL API Number: 067-07621 Status: PR Insp. Status: PR

Producing Well

Comment: [Producing.](#)

Corrective Action:

Date:

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Compaction	Pass	Culverts	Pass			
Gravel	Pass	Gravel	Pass			
Berms	Pass	Compaction	Pass			
Ditches	Pass					

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT