

**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:

05/24/2019

Submitted Date:

05/28/2019

Document Number:

688304676**FIELD INSPECTION FORM**Loc ID 316968 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 94300Name of Operator: WARD & SON* ALFREDAddress: P O BOX 737City: OGALLALLA State: NE Zip: 69153**Status Summary:**

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

Findings:12 Number of Comments4 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
Ward, Randy	(308) 280-0100	randy@wardoil.com	
Young, Rob		rob.young@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
233588	WELL	PR	11/20/2003	OW	121-05641	PIERCE 1	PR

General Comment:[Reinspection](#)[Stuffing box leak repaired at wellhead. Soil piles at old skim pits still on location. Black fiberglass produced water tank still not labeled.](#)

LocationOverall Good: ☒**Signs/Marker:**

Type	TANK LABELS/PLACARDS		
Comment:	Black fiberglass, produced water tank has no labels.		
Corrective Action:	Install sign to comply with Rule 210.d.	Date:	04/16/2018
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 308-280-0100

Corrective Action:

Date: _____

Overall Good: ☐**Spills:**

Type	Area	Volume		
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In Containment: No

Comment:

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

Type: Pump Jack	# 1		corrective date
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Vertical Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	300 BBLS	STEEL AST		,
Comment:					
Corrective Action:					Date:

Paint

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth				Inadequate
Comment: Berm sediments being carried off location (see attached photos).				
Corrective Action: Repair or install berms or other secondary containment devices per Rule 605.a.(4).				Date: 06/28/2019

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	300 BBLS	FIBERGLASS AST		,
Comment: no labels (see corrective action above)					
Corrective Action:					Date:

Paint

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment: same berms as metal produced water tank				
Corrective Action:				Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	2	400 BBLS	STEEL AST		,
Comment: one enardo valve					
Corrective Action:					Date:

Paint

Condition	Adequate
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:				Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Location Construction

Location ID: 233588 CDP: _____

Comment: _____

Corrective Action: _____ Date: _____

Form 2A COAs:**Comment:** No COAs.

Corrective Action: _____ Date: _____

Wildlife BMPs:**Comment:** _____Corrective Action: _____ **Date:** _____**Comment:** _____**Corrective Action:** _____ **Date:** _____**On Site Inspection (305):****Surface Owner Contact Information:**

Name: _____ Address: _____

Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____

Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

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Summary of Operator Response to Landowner Issues:

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Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

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Inspected Facilities									
Facility ID:	233588	Type:	WELL	API Number:	121-05641	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	PR. Feb 2019 production reported to COGCC database.								
Corrective Action:								Date:	

Environmental**Waste Management:**

Type	Management	Condition	GPS (Lat)	(Long)
Oily Soil	Piles	Inadequate		
Comment	See attached photos of stained soil piles near old skim pit that need to be removed. No Form 27 was found in database.			
Corrective Action	Contact COGCC EPS.			Date: 10/08/2018

Spill/Remediation:

Comment:			
Corrective Action:			Date: _____

Emission Control Burner (ECB): _____

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment

Comment:

Corrective Action:

Date: _____

Pits: ☐ NO SURFACE INDICATION OF PITType: Produced WaterLined: NO

Pit ID: _____

Lat: _____

Long: _____

Reference Point: _____

Other: _____

Length: _____

Width: _____

Lining:

Liner Type: _____

Liner Condition: _____

Comment:

Corrective Action

Date: _____

Fencing:Fencing Type: LivestockFencing Condition: Adequate

Comment:

Corrective Action

Date: _____

Netting:

Netting Type: _____

Netting Condition: _____

Comment:

Corrective Action

Date: _____

Anchor Trench Present: _____

Oil Accumulation: YES2+ feet Freeboard: YES

Comment:

Stained soil ring on south side of pit. Pit berms on SE corner are being transported off location. See attached photos.

Corrective Action

Remove stained soil ring in pit and maintain stormwater BMPs on pit berms

Date: 06/28/2019Type: Skimming/SettlingLined: NO

Pit ID: _____

Lat: _____

Long: _____

Reference Point: _____

Other: _____

Length: _____

Width: _____

Lining:

Liner Type: _____

Liner Condition: _____

Comment:

Corrective Action

Date: _____

Fencing:Fencing Type: LivestockFencing Condition: Adequate

Comment:

Corrective Action

Date: _____

Netting:

Netting Type: _____

Netting Condition: _____

Comment:		Date:
Corrective Action		
Anchor Trench Present: Oil Accumulation: <u>NO</u> 2+ feet Freeboard: <u>YES</u>		
Comment:	Skim pit is excavated.	Date:
Corrective Action		