

**FORM
INSP**

Rev
X/20

**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:

03/12/2024

Submitted Date:

03/12/2024

Document Number:

697505174

FIELD INSPECTION FORM

Loc ID: 311276 Inspector Name: Binschus, Chris 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: 10633
 Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC
 Address: 1801 CALIFORNIA STREET #2500
 City: DENVER State: CO Zip: 80202

Findings:

- 6 Number of Comments
- 0 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
		inspections@civiresources.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
239532	WELL	PA	07/24/2018	GW	123-07319	BOULDER BANK 1	RI
446797	TANK BATTERY	AC	07/21/2016		-	BOULDER BANK-61N66W 7SESW	RI
460327	OFF-LOCATION FLOWLINE	AC	03/26/2019		-	Wellhead Line 7SESW	RI
460328	OFF-LOCATION FLOWLINE	AC	03/26/2019		-	Wellhead Line 7SESW	RI
461887	OFF-LOCATION FLOWLINE	AC	03/26/2019		-	Wellhead Line 7SESW	RI
461888	OFF-LOCATION FLOWLINE	AC	03/26/2019		-	Wellhead Line 7SESW	RI
461889	OFF-LOCATION FLOWLINE	AC	03/26/2019		-	Wellhead Line 7SESW	RI

General Comment:

This is a desktop final reclamation inspection in response to a Form 4 Final Reclamation Complete Notice (Doc. #403702370) using cropland drone documentation per the ECMC Operator Guidance.

This is a Final Reclamation Inspection for PA Well API#123-07319 and its associated tank battery. Well was plugged and abandoned 07/24/2018.

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date:

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

Type:	#		corrective date
Comment:	Based on Operator supplied information, all equipment has been removed from the location.		
Corrective Action:			Date:

Venting:

Yes/No			
Comment:			
Corrective Action:			Date:

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities									
Facility ID:	<u>239532</u>	Type:	<u>WELL</u>	API Number:	<u>123-07319</u>	Status:	<u>PA</u>	Insp. Status:	<u>RI</u>
Facility ID:	<u>446797</u>	Type:	<u>TANK</u>	API Number:	<u>-</u>	Status:	<u>AC</u>	Insp. Status:	<u>RI</u>
Facility ID:	<u>460327</u>	Type:	<u>OFF-</u>	API Number:	<u>-</u>	Status:	<u>AC</u>	Insp. Status:	<u>RI</u>
Facility ID:	<u>460328</u>	Type:	<u>OFF-</u>	API Number:	<u>-</u>	Status:	<u>AC</u>	Insp. Status:	<u>RI</u>
Facility ID:	<u>461887</u>	Type:	<u>OFF-</u>	API Number:	<u>-</u>	Status:	<u>AC</u>	Insp. Status:	<u>RI</u>
Facility ID:	<u>461888</u>	Type:	<u>OFF-</u>	API Number:	<u>-</u>	Status:	<u>AC</u>	Insp. Status:	<u>RI</u>
Facility ID:	<u>461889</u>	Type:	<u>OFF-</u>	API Number:	<u>-</u>	Status:	<u>AC</u>	Insp. Status:	<u>RI</u>

Flowline			
#1	Type:	of Lines	
<u>Flowline Description</u>			
Flowline Type:	Size:	Material:	
Variance:	Age:	Contents:	
<u>Integrity Summary</u>			
Failures:	Spills:	Repairs Made:	
Coatings:	H2S:	Cathodic Protection:	
<u>Pressure Testing</u>			
Witnessed:	Test Result:	Charted:	
<u>COGCC Rules(check all that apply)</u>			
<input type="checkbox"/> 1101. Installation and Reclamation <input type="checkbox"/> 1102. Operations, Maintenance, and Repair <input type="checkbox"/> 1103. Abandonment			
Comment:	After reviewing the Operator supplied information, ECMC confirms that the required flowline notice has been submitted.		
Corrective Action:			Date:

Environmental

Spills/Releases:

Type of Spill: _____ Estimated Spill Volume: _____

Comment: After reviewing the Operator supplied information, ECMC confirms that all Remediation projects are approved and closed.

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well Complaint:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

Field Parameters:

Sample Location: _____ Comment: _____

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 _____

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: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment:

Well plugged Pass 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 Pass

Weeds present _____ Subsidence Pass

1004.d. FINAL VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

Comment:

After reviewing the Operator supplied drone imagery, the Operator removed gravel, regraded and contoured the disturbance areas. More than two growing seasons have indicated no significant unrestored subsidence. The well and tank battery location, and access road (used until 2003) are reflective of reference crop areas and meet Rule 1004 standards.

There was a second access road shared with the surface owner between 2004-2023. The access road remains in use for agricultural purposes.

Corrective Action:

Date _____

Overall Final Reclamation

Pass

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

Comment:

After reviewing the Operator supplied drone imagery, no stormwater erosion issues were observed.

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT