



COLORADO OIL & GAS CONSERVATION COMMISSION

NORTHEAST REGION FIELD INSPECTION REPORT

<input type="checkbox"/> NOTICE OF UNSATISFACTORY INSPECTION		PO Box 327	
<input checked="" type="checkbox"/> NOTICE OF SATISFACTORY INSPECTION		Sterling, CO 80751 970-522-6747	
Date: 10-19-04	Facility ID:	Operator: <i>Babcock + Brown</i>	
Location: <i>SWSE 29 2N 57 W</i>		Lease Name: <i>MARGUARDT 1</i>	
API Number: 05-087 - 05588		Inspector: KEVIN LIVELY Cell: 970-380-0166	
INSP TYPE <i>CA</i>	INSP STATUS <i>PA</i>	RECLAM <input type="checkbox"/> PASS <input type="checkbox"/> INTER <input type="checkbox"/> FAIL	PASS/FAIL <input checked="" type="checkbox"/> P <input type="checkbox"/> F
VIOLATION <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		NOV <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
UIC VIOL TYPE: <input type="checkbox"/> UA <input type="checkbox"/> MI <input type="checkbox"/> OP <input type="checkbox"/> PA <input type="checkbox"/> OT		TBG/PKR LK <input type="checkbox"/>	CSG LK <input type="checkbox"/>
ALL UIC VIOLATIONS REQUIRE NOAVS			
Well ID Signs (Rule 210) Y N		Fences Y N (Rule 603.b.(7), 1002.a)	
Production Pits (Rule 902, 903, 904) EARTHEN PITS ONLY		Produced Water Pits Total # _____ Oil Accumulation? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	
SENSITIVE AREA <input type="checkbox"/> YES <input type="checkbox"/> NO		Skimming/Settling Pits Total # _____ Covered # _____ Uncovered # _____	
		Special Purpose Pits Total # _____ Lined # _____ Unlined # _____	
Tank Battery Equipment (Rule 604)		<i>FISH AND SUBMURSIBLE STUCK IN HOLE. TOP OF FISH @ 1893. SHOT CASING OFF AT 1700' AND</i>	
Fire Walls/Berms/Dikes [Rule 604.a.(4)]		<i>PULLED CASING. Ran TUBING BACK and SET 30 SACK CEMENT PLUG ON TOP OF FISH. 40 SKS CEMENT</i>	
General Housekeeping (Rule 603.g)		<i>PUMPED AT 700 FT. 50 SKS MIXED AND PUMPED AT 150' and 15 SKS MIXED AND</i>	
Spills (Oil/Water) (Rule 906)		<i>SPOTTED AT TOP 30 FT.</i>	
UIC Routine Inspection FILL OUT FORM 21 WHEN WITNESSING MIT		Inj. Pressure _____ Psig T-C Ann. Pressure _____ Psig	
Drilling Well/Workover (Rule 317)		COMMENTS <i>BETTER WELL SERVICE RIG AND CEMENTING EQUIP.</i>	
Surface Rehabilitation (Rule 1003, 1004)			
Miscellaneous			
CORRECTIVE ACTION REQUIRED: <i>Remove Pumping unit from Site within 3 months</i>			
Date Corrective Action Required By:		Date Remedied:	

This report is a Notice of Inspection. The Commission requires that you correct any deficiencies shown on this report in a timely manner. Failure to comply may result in enforcement action by the Commission.