

Inspector Name: HICKEY, MIKE

**FORM  
INSP**Rev  
05/11**State of Colorado****Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



|    |    |    |    |
|----|----|----|----|
| DE | ET | OE | ES |
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Inspection Date:

12/20/2011

Document Number:

658500018

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

|                     |               |               |               |                     |
|---------------------|---------------|---------------|---------------|---------------------|
| Location Identifier | Facility ID   | Loc ID        | Tracking Type | Inspector Name:     |
|                     | <u>206691</u> | <u>321328</u> |               | <u>HICKEY, MIKE</u> |

**Operator Information:**

OGCC Operator Number: 14740 Name of Operator: CDM OIL & GAS

Address: 950 S CHERRY ST STE 1100

City: DENVER State: CO Zip: 80222

**Contact Information:****Compliance Summary:**

| QtrQtr: <u>NENW</u> | Sec: <u>34</u> | Twp: <u>1N</u> | Range: <u>69W</u> |                              |          |                |                 |
|---------------------|----------------|----------------|-------------------|------------------------------|----------|----------------|-----------------|
| Insp. Date          | Doc Num        | Insp. Type     | Insp Status       | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
| 08/17/1994          | 500137275      |                | PR                |                              |          | P              | N               |
| 07/13/1999          | 500137276      | PR             | PR                |                              |          | F              | Y               |
| 02/18/2010          | 200231775      | SR             | PR                | S                            | I        |                | N               |
| 08/04/2009          | 200223564      | PR             | PR                | U                            |          |                | Y               |
| 01/18/2011          | 200293934      | PR             | PR                | U                            |          |                | Y               |

**Inspector Comment:**

Location perimeter fence is missing some panels and one panel is on the ground. Interior fencing is new and adequate. Tanks have new paint, placards, and labels.

**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name |                                     |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------------------------------|
| 206682      | WELL | AL     | 02/26/1985  |            | 013-06177 | ADAM 1        |                                     |
| 206691      | WELL | PR     | 06/18/2007  | OW         | 013-06186 | ADAMS 1       | <input checked="" type="checkbox"/> |

**Equipment:**Location Inventory

|                             |                        |                     |                         |
|-----------------------------|------------------------|---------------------|-------------------------|
| Special Purpose Pits: _____ | Drilling Pits: _____   | Wells: _____        | Production Pits: _____  |
| Condensate Tanks: _____     | Water Tanks: _____     | Separators: _____   | Electric Motors: _____  |
| Gas or Diesel Motors: _____ | Cavity Pumps: _____    | LACT Unit: _____    | Pump Jacks: _____       |
| Electric Generators: _____  | Gas Pipeline: _____    | Oil Pipeline: _____ | Water Pipeline: _____   |
| Gas Compressors: _____      | VOC Combustor: _____   | Oil Tanks: _____    | Dehydrator Units: _____ |
| Multi-Well Pits: _____      | Pigging Station: _____ | Flare: _____        | Fuel Tanks: _____       |

**Location****Signs/Marker:**

| Type                 | Satisfactory/Unsatisfactory | Comment   | Corrective Action | CA Date |
|----------------------|-----------------------------|---|-------------------|---------|
| TANK LABELS/PLACARDS | Satisfactory                | Horizontal separator should also be placarded and labelled. |                   |         |

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|  |              |                        |
|--|--------------|------------------------|
| Emergency Contact Number: <u>(S/U/V)</u> | Satisfactory | Corrective Date: _____ |
| Comment: _____                           |              |                        |
| Corrective Action: _____                 |              |                        |

|  |      |        |                   |         |
|--|------|--------|-------------------|---------|
| <b>Spills:</b>   |      |        |                   |         |
| Type   | Area | Volume | Corrective action | CA Date |
| <input type="checkbox"/> Multiple Spills and Releases? |      |        |                   |         |

|                  |                             |   |                   |         |
|------------------|-----------------------------|---|-------------------|---------|
| <b>Fencing/:</b> |                             |   |                   |         |
| Type             | Satisfactory/Unsatisfactory | Comment   | Corrective Action | CA Date |
| SEPARATOR        | Satisfactory                |   |                   |         |
| LOCATION         | Satisfactory                | Interior fences make the perimeter fence redundant. |                   |         |
| WELLHEAD         | Satisfactory                |   |                   |         |
| TANK BATTERY     | Satisfactory                |   |                   |         |

|                      |   |                             |         |                   |         |
|----------------------|---|-----------------------------|---------|-------------------|---------|
| <b>Equipment:</b>    |   |                             |         |                   |         |
| Type                 | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Horizontal Separator | 1 | Satisfactory                |         |                   |         |
| Plunger Lift         | 1 | Satisfactory                |         |                   |         |
| Bird Protectors      | 1 | Satisfactory                |         |                   |         |

|   |              |                |           |                      |       |
|---|--------------|----------------|-----------|----------------------|-------|
| <b>Tanks/Berms:</b> <input type="checkbox"/> New Tank    Tank ID: _____ |              |                |           |                      |       |
| Contents  | #            | Capacity       | Type      | SE GPS               |       |
| CRUDE OIL   | 2            | 300 BBLs       | STEEL AST | 40.012050,105.105310 |       |
| S/U/V:  | Satisfactory | Comment: _____ |           |                      |       |
| Corrective Action: _____  |              |                |           | Corrective Date:     | _____ |

|                        |          |
|------------------------|----------|
| <b>Paint</b>           |          |
| Condition              | Adequate |
| Other (Content) _____  |          |
| Other (Capacity) _____ |          |
| Other (Type) _____     |          |

|                   |          |                     |                     |                 |
|-------------------|----------|---------------------|---------------------|-----------------|
| <b>Berms</b>      |          |                     |                     |                 |
| Type              | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance     |
| Earth             | Adequate | Walls Sufficient    | Base Sufficient     | Adequate        |
| Corrective Action |          |                     |                     | Corrective Date |
| Comment           |          |                     |                     |                 |

|                 |         |
|-----------------|---------|
| <b>Venting:</b> |         |
| Yes/No          | Comment |
|                 |         |

|                 |                             |         |                   |         |
|-----------------|-----------------------------|---------|-------------------|---------|
| <b>Flaring:</b> |                             |         |                   |         |
| Type            | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|                 |                             |         |                   |         |

**Predrill**

Location ID: 321328

**Site Preparation:**

Lease Road Adeq.: \_\_\_\_\_

Pads: \_\_\_\_\_

Soil Stockpile: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:****Wildlife BMPs:****Stormwater:****Comment:** \_\_\_\_\_**Staking:****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:****Summary of Operator Response to Landowner Issues:****Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:****Well**

Facility ID: 206691 API Number: 013-06186 Status: PR Insp. Status: PR

**Environmental****Spills/Releases:**

Type of Spill: \_\_\_\_\_ Description: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

Reportable: \_\_\_\_\_ GPS: Lat \_\_\_\_\_ Long \_\_\_\_\_

Proximity to Surface Water: \_\_\_\_\_ Depth to Ground Water: \_\_\_\_\_

**Water Well:**

DWR Receipt Num: \_\_\_\_\_ Owner Name: \_\_\_\_\_ GPS : \_\_\_\_\_ Lat \_\_\_\_\_ Long \_\_\_\_\_

**Field Parameters:**

Sample Location: \_\_\_\_\_

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Emission Control Burner (ECB): \_\_\_\_\_

Comment: \_\_\_\_\_

Pilot: \_\_\_\_\_ Wildlife Protection Devices (fired vessels): \_\_\_\_\_

**Reclamation - Storm Water - Pit**

**Interim Reclamation:**

Date Interim Reclamation Started: \_\_\_\_\_ Date Interim Reclamation Completed: \_\_\_\_\_

Land Use: \_\_\_\_\_

Comment: \_\_\_\_\_

1003a. Debris removed? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Waste Material Onsite? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Unused or unneeded equipment onsite? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Pit, cellars, rat holes and other bores closed? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Guy line anchors removed? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Guy line anchors marked? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA 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 \_\_\_\_\_

1003 f. Weeds Noxious weeds? \_\_\_\_\_

Comment: \_\_\_\_\_

Overall Interim Reclamation \_\_\_\_\_

**Final Reclamation/ Abandoned Location:**

Date Final Reclamation Started: \_\_\_\_\_ Date Final Reclamation Completed: \_\_\_\_\_

Final Land Use: \_\_\_\_\_

Reminder: \_\_\_\_\_

Comment: \_\_\_\_\_

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|   |   |   |                        |
|---|---|---|------------------------|
| Well plugged _____  | 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 _____                |                        |
| Weeds present _____   |   | Subsidence _____                                |                        |
| Comment: _____  |   |   |                        |
| Corrective Action: _____                                      |   |   | Date _____             |

Overall Final Reclamation

**Storm Water:**

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

S/U/V: \_\_\_\_\_ Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_