

Inspector Name: LEONARD, 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:

03/21/2012

Document Number:

664000410

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>421933</u>	<u>426189</u>		<u>LEONARD, MIKE</u>

Operator Information:OGCC Operator Number: 99999 Name of Operator: OLD OPERATORS - STATUS UNKNOWNAddress: SEE COMMENT LINE IN WELLCity: XXXXXXX State: XX Zip: **Contact Information:**

Contact Name	Phone	Email	Comment
HOLLINSHEAD, RYAN		ryan.hollinshead@state.co.us	

Compliance Summary:

QtrQtr: <u>SESW</u>	Sec: <u>34</u>	Twp: <u>19S</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)
02/07/2012	664000351	TA	TA	U			N
08/04/2011	200318239	ID	TA		F	F	N

Inspector Comment:MET WITH CONTRACTORS FOR PLUGGING JOB SHOWING**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
421933	WELL	TA	03/09/2011		043-40081	HW-3419S69W 1	<input checked="" type="checkbox"/>
426189	LOCATION	AC	03/09/2011		-	HW-3419S69W 1	<input type="checkbox"/>

Equipment:Location Inventory

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

LocationEmergency Contact Number: (S/U/V)Corrective Date: Comment: Corrective Action: **Spills:**

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Venting:		
Yes/No	Comment	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 426189

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: 421933 API Number: 043-40081 Status: TA Insp. Status: TA

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

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Proximity to Surface Water: _____

Depth to Ground Water: _____

Water Well:

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

Field Parameters:

Sample Location: _____

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? _____

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Comment:

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started:

Date Final Reclamation Completed:

Final Land Use:

Reminder:

Comment:

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
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

S/U/V:

Corrective Date:

Comment:

CA: