

**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:

01/06/2012

Document Number:

665400190

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>248198</u>	<u>408747</u>		<u>PRECUP, JIM</u>

Operator Information:OGCC Operator Number: 24461 Name of Operator: DIVERSIFIED OPERATING CORPORATIONAddress: 15000 W 6TH AVE STE 102City: GOLDEN State: CO Zip: 80401**Contact Information:**

Contact Name	Phone	Email	Comment
warburton, bill	303-384-9611	wlw@doccolo.com	operation engineer

Compliance Summary:

QtrQtr: <u>NESE</u>	Sec: <u>21</u>	Twp: <u>8N</u>	Range: <u>58W</u>				
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
12/30/2011	665400057	PA	PA	S			N
09/20/2011	200323042	HR	PA	U	F		Y
06/07/2011	200312899	HR	PA	U	F		Y
01/04/2010	200226294	HR	PA	U	F		Y
03/03/2008	200127598	SR	PA	U	F	P	Y
10/04/2006	200098011	SR	PA	U	F	F	Y
06/19/2006	200093888	SR	PA	U	F	F	Y
03/23/1995	500172988	PR	PR				N

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
248198	WELL	PA	11/18/2005		123-15996	SOONER UNIT 9-21	<input checked="" type="checkbox"/>
408747	LOCATION	CL	04/14/2009		-	SOONER UNIT-68N58W 21NESE	<input type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: _____	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

Inspector Name: PRECUP, JIM

Emergency 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
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Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
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Predrill

Location ID: 408747

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: 248198 API Number: 123-15996 Status: PA Insp. Status: PA

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:

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

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? _____

Inspector Name: PRECUP, JIM

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: _____

Well plugged Pass Pit mouse/rat holes, cellars backfilled Pass

Debris removed Pass No disturbance /Location never built _____

Access Roads Regraded _____ Contoured Pass Culverts removed Pass

Gravel removed Pass

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation Pass Dust and erosion control Pass

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence Pass

Comment: Doc has drilled and reseeded this well site.

Corrective Action: _____ Date _____

Overall Final Reclamation Fail

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: _____

COGCC Comments

Comment	User	Date
Doc has drilled and reseeded this well site. NOAV to be closed conditionalized to a pre-determined settlement schedule. Be advised roads left in place will require a release requested by the surface owner and the producer and must be approved by the COGCC Director. Well site requires 2 growing seasons or adequate coverage of (80%) of pre-disturbance levels.	precupj	04/04/2012

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Inspector Name: PRECUP, JIM

Document Num	Description	URL
665400191	SOONER uNIT 9-21 PICT 1	http://cogcc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=2897063