

**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:

04/10/2012

Document Number:

668400084

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>289176</u>	<u>334442</u>		<u>BROWNING, CHUCK</u>

Operator Information:OGCC Operator Number: 16800 Name of Operator: DELTA PETROLEUM CORPORATIONAddress: 370 17TH ST STE 4300City: DENVERState: COZip: 80202**Contact Information:**

Contact Name	Phone	Email	Comment
Macke, Brian	303-575-0386	bmacke@deltapetro.com	
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector

Compliance Summary:QtrQtr: NESW Sec: 4 Twp: 10S Range: 93W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
07/17/2009	200215426	PR	PR	S			N
07/17/2009	200215427	PR	PR	S			N
04/06/2007	200109219	PR	ND	S	I	P	N
03/30/2007	200117060	ES	AO	U			Y

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
289176	WELL	PR	01/21/2008	LO	077-09238	VEGA UNIT 4-241	<input checked="" type="checkbox"/>
293964	WELL	PR	12/14/2007	LO	077-09461	VEGA 4-331	<input checked="" type="checkbox"/>
293988	WELL	PR	12/18/2007	LO	077-09464	VEGA 4-231	<input checked="" type="checkbox"/>
293989	WELL	PR	12/18/2007	LO	077-09465	VEGA 4-234	<input checked="" type="checkbox"/>
298297	WELL	XX	12/13/2010	LO	077-09753	Vega 4-223	<input type="checkbox"/>
299161	WELL	XX	12/13/2010	LO	077-09787	Vega 4-324	<input type="checkbox"/>
299352	WELL	XX	12/13/2010	LO	077-09799	Vega 4-134	<input type="checkbox"/>
299353	WELL	XX	12/13/2010	LO	077-09800	Vega 4-132	<input type="checkbox"/>
299354	WELL	XX	12/13/2010	LO	077-09801	Vega 4-224	<input type="checkbox"/>
299355	WELL	XX	12/13/2010	LO	077-09802	Vega 4-131	<input type="checkbox"/>
299356	WELL	XX	12/13/2010	LO	077-09803	Vega 4-222	<input type="checkbox"/>
299357	WELL	XX	12/13/2010	LO	077-09804	Vega 4-221	<input type="checkbox"/>
299524	WELL	XX	12/13/2010	LO	077-09812	Vega 4-133	<input type="checkbox"/>
299525	WELL	XX	12/13/2010	LO	077-09813	Vega 4-141	<input type="checkbox"/>
299526	WELL	XX	12/13/2010	LO	077-09814	Vega 4-143	<input type="checkbox"/>

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299527	WELL	XX	12/13/2010	LO	077-09815	Vega 4-232	
299528	WELL	XX	12/14/2010	LO	077-09816	Vega 4-233	
299529	WELL	XX	12/15/2010	LO	077-09817	Vega 4-142	
299530	WELL	XX	12/13/2010	LO	077-09818	Vega 4-144	
334442	LOCATION	AC	04/14/2009		-	VEGA UNIT-610S93W 4NESW	

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

<u>Signs/Marker:</u>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
BATTERY	Satisfactory			
WELLHEAD	Satisfactory			
TANK LABELS/PLACARDS	Satisfactory			

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: _____

Corrective Action: _____

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

<u>Fencing/:</u>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			

<u>Equipment:</u>					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Emission Control Device	1	Satisfactory			
Horizontal Heated Separator	1	Satisfactory			
Gas Meter Run	1	Satisfactory			

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Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	300 BBLS	STEEL AST	39.217630,-107.778310
S/U/V:	Satisfactory		Comment:	
Corrective Action:			Corrective Date:	

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action	Corrective Date
Comment	

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CONDENSATE	4	300 BBLS	STEEL AST	39.217660,-107.778130
S/U/V:	Satisfactory		Comment:	
Corrective Action:			Corrective Date:	

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action	Corrective Date
Comment	

Venting:		
Yes/No	Comment	

Flaring:							
Type	Satisfactory/Unsatisfactory				Comment	Corrective Action	CA Date

Predrill

Location ID: 334442

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**Comment:** _____**CA:** _____**Date:** _____**Wildlife BMPs:****Comment:** _____**CA:** _____**Date:** _____**Stormwater:**

Erosion BMPs

Present

Other BMPs

Present

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____

Other BMPs: _____

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: 289176 API Number: 077-09238 Status: PR Insp. Status: PR

Data retrieval failed for the subreport 'Subreport0' located at: \\dardensterling\leFormPa
Data retrieval failed for the subreport 'Subreport10' located at: \\dardensterling\leFormP

Facility ID: 293964 API Number: 077-09461 Status: PR Insp. Status: PR

Data retrieval failed for the subreport 'Subreport0' located at: \\dardensterling\leFormPa
Data retrieval failed for the subreport 'Subreport10' located at: \\dardensterling\leFormP

Facility ID: 293988 API Number: 077-09464 Status: PR Insp. Status: PR

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Data retrieval failed for the subreport 'Subreport0' located at: \\dardensterling\FarmB
Data retrieval failed for the subreport 'Subreport10' located at: \\dardensterling\FarmB

Facility ID: 293989 API Number: 077-09465 Status: PR Insp. Status: PR

Data retrieval failed for the subreport 'Subreport0' located at: \\dardensterling\FarmB
Data retrieval failed for the subreport 'Subreport10' located at: \\dardensterling\FarmB

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? Pass CM CA Date
Waste Material Onsite? Pass CM CA Date
Unused or unneeded equipment onsite? Pass CM CA Date
Pit, cellars, rat holes and other bores closed? Pass CM CA Date
Guy line anchors removed? Pass CM CA Date
Guy line anchors marked? CM CA Date

1003b. Area no longer in use? Pass Production areas stabilized ? Pass

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1003c. Compacted areas have been cross ripped? Pass

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? Pass

Production areas have been stabilized? Pass 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? P

Comment: _____

Overall Interim Reclamation Pass

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

S/U/V: _____ Corrective Date: _____

Comment: _____

CA: _____