

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: 04/18/2012

Document Number: 664000497

Overall Inspection: **Violation**

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name: <u>LEONARD, MIKE</u>
	<u>297954</u>	<u>313628</u>		

Operator Information:

OGCC Operator Number: 7125 Name of Operator: BEEMAN OIL & GAS LLC

Address: 91 WEDGEWOOD CIR

City: DURANGO State: CO Zip: 81391

Contact Information:

Contact Name	Phone	Email	Comment
WEEMS, MARK		mark.weems@state.co.us	
LABOWSKIE, STEVE		steve.labowskie@state.co.us	
YOKLEY, BILL		bill.yokley@state.co.us	

Compliance Summary:

QtrQtr: SWSW Sec: 9 Twp: 35N Range: 13W

Inspector Comment:

WELL IS LISTED AS XX IN DATABASE. NO DRILLING OR COMPLETION REPORTS SUBMITTED. NO PRODUCTION RECORDS IN THE DATABASE. WELL APPEARS TO HAVE BEEN IN PRODUCTION FOR SOME TIME. OPERATOR HAS THIRTY DAYS TO SUPPLY ALL REQUIRED REPORTS. CONTACTED OPERATOR VIA TELEPHONE, OPERATOTR HAS NO COMPUTER ACCESS WILL MAIL INSPECTION REPORT

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
297954	WELL	XX	08/26/2008	LO	083-06653	DOERFER 1-5	<input checked="" type="checkbox"/>
313628	LOCATION	AC	04/14/2009		-	DOERFER-N35N13W 9SWSW	<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

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
BATTERY	Satisfactory			
WELLHEAD	Satisfactory			
TANK LABELS/PLACARDS	Unsatisfactory	NO LABELS ON TANKS	Install sign to comply with rule 210.b.	05/31/2012

Inspector Name: LEONARD, MIKE

Emergency Contact Number: (S/U/V) _____ Violation _____ Corrective Date: 05/31/2012

Comment: NUMBERS AT BATTERY ARE NOT ACCURATE

Corrective Action: INSTALL CORRECT NUMBERS AT BATTERY

Good Housekeeping:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
DEBRIS	Unsatisfactory	MISC DEBRIS AT WELLHEAD	CLEAN UP DEBRIS	05/31/2012
WEEDS	Unsatisfactory	WEEDS AND GRASSES NEED CONTROLLED AROUND TANKS	CONTROL WEEDS AND GRASSES AROUND TANKS	05/31/2012

Spills:

Type	Area	Volume	Corrective action	CA Date
Crude Oil	WELLHEAD	<= 5 bbls	CLEAN UP OILY SOIL AT WELLHEAD	05/31/2012
Crude Oil	Tank	<= 5 bbls	CLEAN UP OILY SOIL AT TANKS	05/31/2012

Multiple Spills and Releases?

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Horizontal Heated Separator	1	Satisfactory			
Pump Jack	1	Satisfactory			
Prime Mover	1	Satisfactory			

Tanks/Berms: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CRUDE OIL	1	200 BBLS	STEEL AST	37.297790,-108.295010

S/U/V: Unsatisfactory Comment: SAME BERM AS HEATED TANK

Corrective Action: PAINT TANK

Corrective Date: _____

Paint

Condition: Inadequate

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action _____ Corrective Date _____

Comment _____

Tanks/Berms:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	1	200 BBLS	HEATED STEEL AST	37.297790,-108.295010	
S/U/V:	Unsatisfactory	Comment:			
Corrective Action:	TANK NEEDS PAINTED			Corrective Date:	07/31/2012
Paint					
Condition	Inadequate				
Other (Content)	_____				
Other (Capacity)	_____				
Other (Type)	_____				
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Inadequate	Walls Sufficient	Base Sufficient	Inadequate	
Corrective Action	REPAIR BERMS TO CONTAIN VOLUME OF LARGEST ANK PLUS PRECIPITATION			Corrective Date	05/31/2012
Comment	_____				
Venting:					
Yes/No	Comment				
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 313628

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Wildlife BMPs:

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: 297954 API Number: 083-06653 Status: XX Insp. Status: SI

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

S/V: Violation

CA Date: 05/30/2012

CA: Well must be either: 1) Put on production or 2) Per COGCC Rule 326.b.(1) a mechanical integrity test shall be performed on each shut-in well within two (2) years of the initial shut-in date or 3) Be properly plugged and abandoned . Shut-in and temporarily abandoned wells must be properly reported on COGCC Form 7, Operator's Monthly Production Report. IN ADDTION SUBMIT FORMS 5 AND 5A ALONG WITH PRODUCTION RECORDS

Comment: APPEARS TO HAVE BEEN PRODUCED. NO PRODUCTION RECORDS IN DATABASE

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? _____

RESTORATION AND REVEGETATION

Inspector Name: LEONARD, MIKE

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 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: _____

Attached Documents

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

Document Num	Description	URL
664000500	BATTERY SIGN	http://cogcc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=2909263
664000501	BATTERY	http://cogcc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=2909264
664000502	WELLHEAD	http://cogcc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=2909265
664000503	WELLHEAD	http://cogcc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=2909266