

**FORM
INSP**

Rev
05/11

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
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Inspection Date:
07/11/2012

Document Number:
663400582

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>225322</u>	<u>313812</u>		<u>EDELEN, RANDY</u>

Operator Information:

OGCC Operator Number:	<u>20275</u>	Name of Operator:	<u>CORAL PRODUCTION CORP</u>
Address:	<u>1600 STOUT ST STE 1500</u>		
City:	<u>DENVER</u>	State:	<u>CO</u>
		Zip:	<u>80202</u>

Contact Information:

Contact Name	Phone	Email	Comment
Marjorie	Wallace	marjoriwallace@comcast.net	
WEBER, JAMES R	303-623-3573	none	

Compliance Summary:

QtrQtr:	Sec:	Twp:	Range:				
<u>NWSW</u>	<u>16</u>	<u>2N</u>	<u>56W</u>				
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
04/27/2011	200308744	RT	AC	S			N
05/25/2010	200253090	RT	AC	S			N
07/20/2009	200215474	MI	AC	S			N
07/10/2009	200214593	MI	AC	S			N
01/02/2009	200201775	ES	AC	S			N
08/12/2008	200194071	ES	AC	U			Y
04/22/2008	200130625	RT	AC	S			N
06/08/2007	200115144	RT	AC	S		P	N
08/02/2006	200094672	RT	AC	S		P	N
04/12/2005	200069460	RT	AC	S		P	N
07/02/2004	200056420	MI	SI	S		P	N
06/24/2004	200056266	MI	AC	U		F	Y
05/21/2003	200039435	RT	AC	S		P	N
06/11/2002	200032453	RT	AC	S		P	N
08/24/2001	200019660	RT	AC	S		P	N
07/07/2000	200008078	RT	AC	S		P	N
03/19/1996	500155416	SR	AC			P	N

Inspector Comment:

Routine UIC

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
225322	WELL	IJ	06/21/1989		087-05725	STATE 1	<input checked="" type="checkbox"/>

Equipment:		<u>Location Inventory</u>	
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

Lease Road:				
Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Unsatisfactory	Road is muddy and impassable	Repair and maintain road	08/31/2012

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Unsatisfactory	Sign incomplete	Install sign to comply with rule 210.b.	08/31/2012

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

Comment: _____

Corrective Action: _____

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

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

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Flow Line	1	Satisfactory			

Venting:	
Yes/No	Comment
NO	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 313812

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:

Facility

Facility ID: 225322 Type: WELL API Number: 087-05725 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: JSND
 TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 07/20/2009
 Brhd: Pressure or inches of Hg 100 psig _____ Previous Test Pressure _____ AnnMTRReq: _____

Comment: Did not have equipment to crossover to 3/4" npt to check injection pressure

Method of Injection: _____

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

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: _____

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:

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

Inspector Name: EDELEN, RANDY

S/U/V: Satisfactory 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
663400582	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=2951220