

**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



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Inspection Date:

10/30/2012

Document Number:

663901906

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>288572</u>	<u>415252</u>		<u>QUINT, CRAIG</u>

Operator Information:

OGCC Operator Number: 96340 Name of Operator: WIEPKING-FULLERTON ENERGY LLC

Address: 4600 S DOWNING ST

City: ENGLEWOOD State: CO Zip: 80113

Contact Information:

Contact Name	Phone	Email	Comment
Halde, Kerry	719-346-0653 off	haldesand@centurytel.net	719-340-0329 cell

Compliance Summary:

QtrQtr: NWNE Sec: 36 Twp: 14S Range: 46W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
12/23/2011	663900276	XX	PA	U		F	N
07/06/2011	200315768	SR	PA	U			N
07/05/2011	200315767	CA	PA	S			N
09/28/2010	200274228	PR	WO	U			Y
02/03/2010	200230916	CC	DG	S			N
02/03/2010	200230010	CC	DG	S			N
01/16/2009	200202691	DG	ND	U			Y

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
288572	WELL	PA	07/05/2011	LO	017-07648	SARAH 5	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>1</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>1</u>	Separators: <u>1</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>1</u>
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: <u>1</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

LocationEmergency Contact Number: (S/U/V) _____

Corrective Date: _____

Comment: _____

Inspector Name: QUINT, CRAIG

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: 415252

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:

Comment:

CA:

Date:

Wildlife BMPs:

BMP Type	Comment
PROPOSED BMPs	<p>BMP Plan</p> <p>Wiepking - Fullerton Energy, L.L.C.</p> <p>Certification to Discharge Under</p> <p>CDPS General Permit COR -03000</p> <p>Stormwater Discharges Associated with Construction</p> <p>Certification Number COR 39788</p> <p>Sarah # 5 well</p> <p>T14S, R46W</p> <p>Sec. 36: NW1/4NE1/4</p> <p>Cheyenne County, Colorado</p> <p>Description of Well Site and Construction Area</p> <p>1 -3 acre site with access road for drilling of oil and gas well. Terrain is flat with native grass and sagebrush. No receiving waters will be affected by well pad. Upon completion of drilling operations, pits will be closed, reclaimed and drill site location reseeded within 6 months weather permitting. Silt fences will be installed on low side site of drill site. Topsoil will be separated and spread on drill site as final operation before reseeding operations. To prevent soil erosion site will be disked and straw crimped in or manure spread.</p> <p>Stormwater Management Plan (SWMP) is on file in Wiepking-Fullerton Energy, L.L.C. office.</p> <p>Spill Prevention, Control and Countermeasure Plan is on file in Wiepking-Fullerton Energy, L.L.C. office.</p>

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:

Inspector Name: QUINT, CRAIG

Landman Name: _____	Phone Number: _____
Date Onsite Request Received: _____	Date of Rule 306 Consultation: _____
Request LGD Attendance: _____	
<u>LGD Contact Information:</u>	
Name: _____	Phone Number: _____ Agreed to Attend: _____
<u>Summary of Landowner Issues:</u>	
<u>Summary of Operator Response to Landowner Issues:</u>	
<u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u>	

Facility

Facility ID: 288572 Type: WELL API Number: 017-07648 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: RANGELAND
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 REVEGETATIONCropland

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: RANGELAND

Reminder: _____

Comment: _____

Well plugged Pass Pit mouse/rat holes, cellars backfilled Pass
 Debris removed Pass No disturbance /Location never built _____
 Access Roads Regraded _____ Contoured _____ Culverts removed _____
Gravel removed _____

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

Compaction alleviation _____ Dust and erosion control _____

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

Weeds present Pass Subsidence _____

Comment: **LOCATION IS CLEAN, CONTOURED WITH AREAS THAT HAVE MINIMAL TO NO GRASS AND COVERED WITH WEEDS.**

Corrective Action: **CONTROL WEEDS, RESEED AS NEEDED. WILL NEED SEVERAL MORE GROWING SEASONS.** Date _____

Overall Final Reclamation In Process Multi-Well Location ☐

Inspector Name: QUINT, CRAIG

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: _____