

Inspector Name: LEONARD, MIKE

**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:

01/21/2013

Document Number:

668200401

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name: <u>LEONARD, MIKE</u>
	<u>424812</u>	<u>424805</u>		

Operator Information:OGCC Operator Number: 10417 Name of Operator: INCREMENTAL OIL AND GAS (FLORENCE) LLCAddress: 4900 CALIFORNIA AVENUE, TOWER B-210City: BAKERSFIELD State: CA Zip: 93309**Contact Information:**

Contact Name	Phone	Email	Comment
Regan-Williams, Sharon	(720) 932-8152	sharon@incrementalog.com	Florence Inspections
McGann, Gerry	(720) 932-8252	gerrymcgann@iinet.net.au	

Compliance Summary:QtrQtr: SESW Sec: 21 Twp: 19S Range: 69W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
424804	WELL	XX	08/19/2011	LO	043-06205	COHO 24-21	<input checked="" type="checkbox"/>
424812	WELL	XX	08/19/2011	LO	043-06207	AURORA 24-21	<input checked="" type="checkbox"/>
424956	PIT		04/25/2012		-	COHO-AURORA 24-21	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>2</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: <u>2</u>
Gas or Diesel Motors: <u>2</u>	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>2</u>
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: <u>4</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location**Signs/Marker:**

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
DRILLING/RECOMP	Satisfactory			

Emergency Contact Number: (S/U/V) Satisfactory

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

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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
PIT		IN PROCESS OF BEING FENCED		
LOCATION	Satisfactory	LOCATION IN PROCESS OF BEING FENCED		
<u>Venting:</u>				
Yes/No	Comment			
<u>Flaring:</u>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 424805

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	koepsear	Due to the likely hood of oil being received in the pit and exceeding 10,000 ppm TPH an approved Pit Permit (Form 15) will be required prior to pit construction. The form 15 shall include a pit management plan.	07/20/2011

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: 424804 Type: WELL API Number: 043-06205 Status: XX Insp. Status: ND

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Facility ID: 424812 Type: WELL API Number: 043-06207 Status: XX Insp. Status: DG

Cement

Cement Contractor

Contractor Name: BAKER HUGHES

Contractor Phone: _____

Surface Casing

Cement Volume (sx): 395

Circulate to Surface: YES

Cement Fall Back: NO

Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): _____

Good Return During Job: _____

Production Casing

Cement Volume (sx): _____

Good Return During Job: _____

Plugging Operations

Depth Plugs(feet range): _____

Cement Volume (sx): _____

Good Return During Job: _____

Cement Type: _____

Comment: ARRIVE 1000 HRS.3D DRILLING FINISHED RUNNING 8 5/8" TO 670'.RU BAKER, PUMP 395 SKS
15.8#.DISPLACE,BUMPPLUG.PLUG.HELD.FALLBACK 3'-4' IN CONDUCTOR IN 20 MINUTES.STOPPED
FALLING.STABLE FOR 10 MINUTES

Facility ID: 424956 Type: PIT API Number: - Status: Insp. Status: _____

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: RANGELAND

Comment: _____

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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: RANGELAND _____

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: _____

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Corrective Action:

Date

Overall Final Reclamation

Multi-Well Location ☐

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Compaction	Pass	Compaction	Pass			
Slope Roughening	Pass	Other	Pass			TRACK PAD
Waddles	Pass					
Culverts	Pass	Gravel	Pass			
Ditches	Pass	Waddles	Pass			
Berms	Pass	Ditches	Pass			

S/U/V: Satisfactory Corrective Date:

Comment:

CA:

Pits:

Pit Type: Drilling Pit Lined: YES Pit ID: 424956 Lat: 38.376080 Long: -105.117400

Lining:

Liner Type: Other Liner Condition: Adequate

Comment: GEOTEXTILE

Fencing:

Fencing Type: Fencing Condition:

Comment: IN PROCESS OF CONSTRUCTION

Netting:

Netting Type: Netting Condition:

Comment:

Anchor Trench Present: YES Oil Accumulation: NO 2+ feet Freeboard:

Pit (S/U/V): Satisfactory Comment:

Corrective Action: Date:

Permit:	Facility ID	Permit Num	Expiration Date
	424956	2215621	
	424956	2215621	