

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:
05/29/2013

Document Number:
663801062

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	<input type="checkbox"/>
	<u>335652</u>	<u>335652</u>	<u>LONGWORTH, MIKE</u>	2A Doc Num:	

Operator Information:

OGCC Operator Number: 69175 Name of Operator: PDC ENERGY INC
 Address: 1775 SHERMAN STREET - STE 3000
 City: DENVER State: CO Zip: 80203

Contact Information:

Contact Name	Phone	Email	Comment
Winters, Ed		ewinters@petd.com	
AHLSTRAND, DENNIS		dennis.ahlstrand@state.co.us	

Compliance Summary:

QtrQtr: SENE Sec: 7 Twp: 6S Range: 96W

Inspector Comment:

Added Location ID: 335666 to Location ID: 335652

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
265443	WELL	PR	05/01/2012	GW	045-09015	CHEVRON 32-7D	X
265530	WELL	PR	05/01/2012	GW	045-09026	CHEVRON 42-7D	X
265531	WELL	PR	05/01/2012	GW	045-09025	CHEVRON 43-7D	X
265532	WELL	PR	05/01/2012	GW	045-09024	CHEVRON 31-7D	X
265533	WELL	PR	05/01/2012	GW	045-09023	CHEVRON 41-7D	X
265534	WELL	PR	12/17/2002	LO	045-09022	CHEVRON 33-7D	X
288551	WELL	PR	09/28/2007	GW	045-13296	CHEVRON 41A-7D	X
289254	WELL	PR		GW	045-13708	CHEVRON 41C-7D	X
289376	WELL	PR		GW	045-13738	CHEVRON 41D-7D	X
289422	WELL	PR		GW	045-13759	CHEVRON 42A-7D	X
289423	WELL	PR	10/01/2011	GW	045-13758	CHEVRON 31B-7D	X
289424	WELL	PR	09/28/2007	GW	045-13757	CHEVRON 43B-7D	X
289425	WELL	PR	09/28/2007	GW	045-13756	CHEVRON 43D-7D	X
289426	WELL	PR	09/28/2007	GW	045-13755	CHEVRON 43A-7D	X
289699	WELL	PR		GW	045-13851	CHEVRON 42D-7D	X
289700	WELL	PR	09/28/2007	GW	045-13850	CHEVRON 31D-7D	X

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

Lease Road:				
Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Main	Satisfactory			

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

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

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TRASH	Satisfactory			

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

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

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Bird Protectors	8	Satisfactory			
Horizontal Heated Separator	16	Satisfactory			
Plunger Lift	16	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	300 BBLS	STEEL AST	,
S/U/V:	Satisfactory	Comment:		
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content)	_____			
Other (Capacity)	_____			
Other (Type)	_____			
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	200 BBLS	PBV STEEL	39.538440,108.144230
S/U/V:	Satisfactory	Comment:		
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content)	_____			
Other (Capacity)	_____			
Other (Type)	_____			
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficent	Base Sufficient	Adequate
Corrective Action				Corrective Date
Comment				

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CONDENSATE	1	300 BBLS	STEEL AST	39.539590,108.142780
S/U/V:	Satisfactory	Comment:		
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content)	_____			
Other (Capacity)	_____			
Other (Type)	_____			
<u>Berms</u>				
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	1	400 BBLS	STEEL AST	,
S/U/V:	Satisfactory	Comment:		
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content)	_____			
Other (Capacity)	_____			
Other (Type)	_____			
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				

Venting:	
Yes/No	Comment

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 335652

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: 265443 Type: WELL API Number: 045-09015 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 265530 Type: WELL API Number: 045-09026 Status: PR Insp. Status: PR

Producing Well									
Comment: Producing well									
Facility ID:	265531	Type:	WELL	API Number:	045-09025	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Producing well									
Facility ID:	265532	Type:	WELL	API Number:	045-09024	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Producing well									
Facility ID:	265533	Type:	WELL	API Number:	045-09023	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Producing well									
Facility ID:	265534	Type:	WELL	API Number:	045-09022	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Producing well									
Facility ID:	288551	Type:	WELL	API Number:	045-13296	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Producing well									
Facility ID:	289254	Type:	WELL	API Number:	045-13708	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Producing well									
Facility ID:	289376	Type:	WELL	API Number:	045-13738	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Producing well									
Facility ID:	289422	Type:	WELL	API Number:	045-13759	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Producing well									
Facility ID:	289423	Type:	WELL	API Number:	045-13758	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Producing well									
Facility ID:	289424	Type:	WELL	API Number:	045-13757	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Producing well									
Facility ID:	289425	Type:	WELL	API Number:	045-13756	Status:	PR	Insp. Status:	PR
Producing Well									
Comment: Producing well									

Facility ID: 289426 Type: WELL API Number: 045-13755 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 289699 Type: WELL API Number: 045-13851 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 289700 Type: WELL API Number: 045-13850 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

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? 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? _____ CM _____
 CA _____ CA Date _____
 Guy line anchors marked? Pass CM _____
 CA _____ CA Date _____

1003b. Area no longer in use? In Production areas stabilized ? Pass
 1003c. Compacted areas have been cross ripped? _____
 1003d. Drilling pit closed? Pass 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? In
 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? P

Comment: _____

Overall Interim Reclamation In Process

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 Multi-Well Location

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
		Gravel	Pass			
		Retention Ponds	Pass			

Inspector Name: LONGWORTH, MIKE

		Rip Rap	Pass			
		Check Dams	Pass			
Seeding		Culverts	Pass			
Ditches	Pass	Ditches	Pass			
Berms	Pass	Berms	Pass	MHSP	Pass	
Compaction	Pass	Compaction	Pass			

S/U/V: Satisfactory Corrective Date: _____

Comment:

CA: