

**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
----	----	----	----

Inspection Date:

05/30/2013

Document Number:

669400712

Overall Inspection:

Violation**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	<u>214498</u>	<u>325293</u>	<u>LABOWSKIE, STEVE</u>	<input type="checkbox"/> 2A Doc Num: _____

Operator Information:OGCC Operator Number: 96735 Name of Operator: WILLIFORD RESOURCES, L.L.C.Address: 6506 S LEWIS AVE STE 102City: TULSA State: OK Zip: 74136**Contact Information:**

Contact Name	Phone	Email	Comment
Callahan, Linda	(918) 712-8828	lcallahan3@swbell.net	e-mail receipient
Stevens, Glenn		glennstevens@centurylink.net	Lease Operator/local contact
SPRAY, KAREN		karen.spray@state.co.us	

Compliance Summary:QtrQtr: NENW Sec: 7 Twp: 33N Range: 11W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/07/2013	669400644	PR	PR	V	I		Y
07/08/1997	500147436	ID	SI			P	N
08/26/1996	500147435	ID	SI			P	N
10/18/1995	500147434	ID	TA				Y

Inspector Comment:

Contact EPS Karen Spray and submit Form 27 if she requires for open drilling pit and surface releases.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
214498	WELL	PR	01/01/2011	OW	067-06101	LONG & SCHLUTER 6	<input checked="" 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
WELLHEAD	Violation	sign on pumpjack is for "Dye Hard #2" PA well	install sign with correct well information	06/14/2013

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

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
DEBRIS	Unsatisfactory	pallet, thread protectors	remove debris	07/04/2013

Spills:				
Type	Area	Volume	Corrective action	CA Date
Crude Oil	Tank	<= 5 bbls	where old tank was appears to be an old accumulation, remove and dispose or remediate/land farm in an approved manner. (submit Form 27 if required by EPS)	06/14/2013
Crude Oil	Pump Jack	<= 5 bbls	crude recently sprayed on and around pumping unit. Clean equipment and remove/remediate stain soils	06/14/2013
Lube Oil	Pump Jack	<= 5 bbls	lube oil accumulated under natural gas engine, remove/remediate.	06/28/2013

☒ Multiple Spills and Releases?

Venting:		
Yes/No	Comment	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 325293

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: 214498 Type: WELL API Number: 067-06101 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Environmental**Spills/Releases:**

Inspector Name: LABOWSKIE, STEVE

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? <u>Fail</u> CM _____	
CA	<div style="border: 1px solid red; padding: 2px;">remove all debris</div>	CA Date <div style="border: 1px solid red; padding: 2px;">06/28/2013</div>
	Waste Material Onsite? <u>Pass</u> CM _____	
CA	_____	CA Date _____
	Unused or unneeded equipment onsite? <u>Pass</u> CM _____	
CA	_____	CA Date _____
	Pit, cellars, rat holes and other bores closed? <u>Fail</u> CM _____	
CA	<div style="border: 1px solid red; padding: 2px;">close pit when OK'd by EPS</div>	CA Date <div style="border: 1px solid red; padding: 2px;">08/02/2013</div>
	Guy line anchors removed? _____ CM _____	
CA	_____	CA Date _____
	Guy line anchors marked? <u>Pass</u> 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? Fail 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? Pass Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Inspector Name: LABOWSKIE, STEVE

Top soil replaced _____

Recontoured _____

Perennial forage re-established _____

Non-Cropland

Top soil replaced _____

Recontoured _____

80% Revegetation _____ In _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation _____ Fail _____

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
				SI	Fail	

S/U/V: _____ Corrective Date: _____

Comment: run-off from pad goes towards unclosed drilling pit.

CA: _____

COGCC Comments

Comment	User	Date
Self report locations with issues like these and develop a compliance schedule.	labowsks	05/31/2013