

**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:

05/20/2013

Document Number:

664001005

Overall Inspection:

Violation**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	<u>239242</u>	<u>405727</u>	<u>SCHURE, KYM</u>	<input type="checkbox"/> 2A Doc Num: _____

Operator Information:OGCC Operator Number: 7800 Name of Operator: BEREN CORPORATIONAddress: 2020 N BRAMBLEWOOD STREETCity: WICHITA State: KS Zip: 67206**Contact Information:**

Contact Name	Phone	Email	Comment
Richmond, Emma	(316) 337-8370	ecrichmond@berexco.com	
LEONARD, MIKE		mike.leonard@state.co.us	
KOEHLER, BOB		bob.koehler@state.co.us	
BURN, DIANA		diana.burn@state.co.us	

Compliance Summary:QtrQtr: SWSW Sec: 29 Twp: 12N Range: 56W**Inspector Comment:**

Well is designated DG status. No production records are filed. Well history shows well PA 11/08/1990. No record of MIT. Injection apparatus is in place at wellhead. No signage at wellhead. Invalid emergency contact no. infor. (violation)

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
239242	WELL	DG	07/19/2012	OW	123-07029	MOYER 2	<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: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: <u>1</u>
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		Define and maintain lease road.	07/31/2013

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Unsatisfactory	No placarding on fiberglass tanks for water flood.	Install sign to comply with rule 210.d.	06/30/2013

TANK LABELS/PLACARDS	Violation	Invalid/Incomplete signage at battery. Assuming well is tied to Moyer A battery.	Install sign to comply with rule 210.d.	06/30/2013
BATTERY	Unsatisfactory	Invalid/Incorrect signage at battery. Battery signage must list all related wells.	Install sign to comply with rule 210.d.	06/30/2013
TANK LABELS/PLACARDS	Unsatisfactory	No signage/placarding/labels at separator	Install sign to comply with rule 210.d.	06/30/2013

Emergency Contact Number: (S/U/V) Violation _____ Corrective Date: 06/30/2013

Comment: Incorrect/Invalid signage at battery. Inspector called 308-334-5680 listed on Beren Corp. sign at 7:00pm on 06/12/2013 answered by machine. Emergency contact no. is required on all signage and must be answered by live attendant 24-7-365

Corrective Action: Install sign to comply with rule 210

Good Housekeeping:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
DEBRIS	Unsatisfactory	Debris on site at associated battery.	Remove debris	06/30/2013
STORAGE OF SUPL	Unsatisfactory	Storage of supplies and equipment on site laying on ground at associated battery.	Remove	06/30/2013
TRASH	Unsatisfactory	Trash on site laying on ground at associated battery	Remove trash	06/30/2013

Spills:

Type	Area	Volume	Corrective action	CA Date
Crude Oil	Separator	<= 5 bbls	Remove/remediate saturated soils at separator and inside shack at separator	06/30/2013
Crude Oil	Truck Loadout	<= 5 bbls	Remove/remediate affected soils at tank battery.	06/30/2013

☒ Multiple Spills and Releases?

Inspector Name: SCHURE, KYM

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
S/U/V:			Comment: _____		
Corrective Action: _____				Corrective Date: _____	
Paint					
Condition	_____				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Inadequate	Walls Insufficient	Base Insufficient	Inadequate	
Corrective Action	Repair and maintain berm at Moyer A Battery. Install berms at water storage tanks for injection system prior to putting system into service.			Corrective Date 07/31/2013	
Comment	Berm at Moyer A Battery is in disrepair, requiring repair and maintenance.				
Venting:					
Yes/No	Comment				
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 405727

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: 239242 Type: WELL API Number: 123-07029 Status: DG Insp. Status: SI

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids**Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment:

Well has injection apparatus in place. Well shows PA -11/08/1990. No record of MIT

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

S/V: Satisfactory CA Date: _____

CA: _____

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: 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 _____ 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

S/U/V: **Violation** Corrective Date: **07/31/2013**

Comment: No stormwater erosion BMP's in use

CA: Install and maintain BMP's