

Inspector Name: Peterson, Tom

**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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| DE | ET | OE | ES |
|----|----|----|----|

Inspection Date:

09/06/2013

Document Number:

671100390

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|---------------|---------------|----------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | <u>416667</u> | <u>416485</u> | <u>Peterson, Tom</u> | <input type="checkbox"/> | |

Operator Information:

OGCC Operator Number: 16660 Name of Operator: CHESAPEAKE OPERATING INC

Address: P O BOX 18496

City: OKLAHOMA CITY State: OK Zip: 73154-

Contact Information:

| Contact Name | Phone | Email | Comment |
|---------------|----------------|----------------------|---------|
| Andrew, Sandy | (307) 234-9045 | sandy.andrew@chk.com | |

Compliance Summary:

QtrQtr: SESE Sec: 36 Twp: 9N Range: 66W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 09/06/2011 | 200320707 | CO | WK | S | | | N |

Inspector Comment:**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------------------------------|
| 416667 | WELL | PR | 08/31/2012 | OW | 123-31447 | STATE 36-9-66 1H | <input checked="" type="checkbox"/> |

Equipment:**Location Inventory**

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

Location

| Signs/Marker: | | | | |
|----------------------|-----------------------------|---------------------|-------------------|---------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| BATTERY | Satisfactory | | | |
| TANK LABELS/PLACARDS | Satisfactory | | | |
| WELLHEAD | Satisfactory | | | |
| OTHER | Satisfactory | Lease road entrance | | |

Emergency Contact Number: (S/U/V) SatisfactoryCorrective Date: Comment:

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Corrective Action:

| Spills: | | | | |
|----------------|---------------|-----------|--|------------|
| Type | Area | Volume | Corrective action | CA Date |
| Crude Oil | Tank | <= 5 bbls | Remove or remediate oily soil in front of production tanks | 10/11/2013 |
| Lube Oil | Pump Jack | <= 5 bbls | Remove or remediate oily areas below engine oil supply drum. Repair all leaks. | 10/11/2013 |
| Crude Oil | Truck Loadout | <= 5 bbls | Remove or remediate oily soil in front of battery and load line buckets | 10/11/2013 |

☐ Multiple Spills and Releases?

| Fencing/: | | | | |
|------------------|-----------------------------|-------------|-------------------|---------|
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| PUMP JACK | Satisfactory | Panel | | |
| LOCATION | Satisfactory | Barbed wire | | |

| Equipment: | | | | | |
|-------------------------|---|-----------------------------|----------------------------------|-------------------|---------|
| Type | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Gas Meter Run | 1 | Satisfactory | | | |
| Deadman # & Marked | 4 | Satisfactory | | | |
| Veritcal Heater Treater | 1 | Satisfactory | N40.41833 W104.43089 | | |
| Ancillary equipment | 1 | Satisfactory | Propane tank | | |
| Bird Protectors | 2 | Satisfactory | | | |
| Pump Jack | 1 | Satisfactory | | | |
| Flare | 1 | Satisfactory | | | |
| Emission Control Device | 1 | Satisfactory | | | |
| Horizontal Separator | 1 | Satisfactory | | | |
| Ancillary equipment | 1 | Satisfactory | Recirculating pump | | |
| Prime Mover | 1 | Satisfactory | Natural gas engine on pumpjack | | |
| Prime Mover | 1 | Satisfactory | Gas engine on recirculating pump | | |

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| | | | | |
|--------------------|--------------|--|------------------|--------|
| Facilities: | | <input type="checkbox"/> New Tank | Tank ID: _____ | |
| Contents | # | Capacity | Type | SE GPS |
| PRODUCED WATER | 1 | 400 BBLS | FIBERGLASS AST | , |
| S/U/V: | Satisfactory | Comment: Same GPS coordinates as crude oil tanks | | |
| Corrective Action: | | | Corrective Date: | |

Paint

| | |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

| | | | | |
|-------|----------|---------------------|---------------------|-------------|
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| Earth | Adequate | Walls Sufficient | Base Sufficient | Inadequate |

| | | | |
|-------------------|--------------------------------|-----------------|------------|
| Corrective Action | Rebuild berm | Corrective Date | 10/11/2013 |
| Comment | Berm knocked down on NW corner | | |

| | | | | |
|--------------------|--------------|-----------------------------------|------------------|--------|
| Facilities: | | <input type="checkbox"/> New Tank | Tank ID: _____ | |
| Contents | # | Capacity | Type | SE GPS |
| CRUDE OIL | 2 | 400 BBLS | STEEL AST | , |
| S/U/V: | Satisfactory | Comment: N40.41808 W104.43096 | | |
| Corrective Action: | | | Corrective Date: | |

Paint

| | |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

| | | | | |
|-------|----------|---------------------|---------------------|-------------|
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| Earth | Adequate | Walls Sufficient | Base Sufficient | Inadequate |

| | | | |
|-------------------|--------------------------------|-----------------|------------|
| Corrective Action | Rebuild berm | Corrective Date | 10/11/2013 |
| Comment | Berm knocked down on NW corner | | |

| | | |
|-----------------|---------|--|
| Venting: | | |
| Yes/No | Comment | |
| NO | | |

| | | | | |
|-----------------|-----------------------------|---------|-------------------|---------|
| Flaring: | | | | |
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| | | | | |

Predrill

Location ID: 416485

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: 416667 Type: WELL API Number: 123-31447 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Environmental**Spills/Releases:**

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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: _____

Complaint:

| Tracking Num | Category | Assigned To | Description | Incident Date |
|--------------|------------|---------------|---|---------------|
| 200355789 | WATER WELL | AXELSON, JOHN | Complainant has noticed odor from water is concerned it could be related to oil & gas. Requested water well sample. | 07/09/2012 |

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: CRP

Comment: Rathole has subsided in front of pumpjack and requires additional fill

1003a. Debris removed? Pass CM _____
CA _____ CA Date _____
Waste Material Onsite? Pass CM _____
CA _____ CA Date _____
Unused or unneeded equipment onsite? Pass CM _____
CA _____ CA Date _____
Pit, cellars, rat holes and other bores closed? Fail CM Wellhead cellar is uncovered
CA Install cover over cellar CA Date 10/11/2013
Guy line anchors removed? _____ CM _____
CA _____ CA Date _____
Guy line anchors marked? Pass CM _____
CA _____ CA Date _____

1003b. Area no longer in use? Fail Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

Cuttings management: _____

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1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? Fail
Production areas have been stabilized? Pass Segregated soils have been replaced? Fail

RESTORATION AND REVEGETATION

Cropland

Top soil replaced Fail Recontoured Fail Perennial forage re-established Fail

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? P

Comment: No interim reclamation has been started

Overall Interim Reclamation Fail

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: CRP

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 | Gravel | Pass | SI | Pass | |

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____