

**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:

11/19/2013

Document Number:

668601697

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	300868	309663	QUINT, CRAIG	<input type="checkbox"/> 2A Doc Num: _____

Operator Information:

OGCC Operator Number: _____

Name of Operator: WIEPKING-FULLERTON ENERGY LLCAddress: 4600 S DOWNING STCity: ENGLEWOOD State: CO Zip: 80113

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED
- ☐ INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

Contact Name	Phone	Email	Comment
HALDE, KERRY	(719) 346-0653	haldesand@centurytel.net	ALL INSPECTIONS

Compliance Summary:QtrQtr: SESW Sec: 19 Twp: 10S Range: 55W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
08/06/2012	663901470	PR	PR	Satisfactory	P		No
04/11/2011	200308319	PR	PR	Satisfactory			No
10/05/2010	200279832	PR	PR	Satisfactory			No
09/09/2010	200270693	PR	PR	Satisfactory			No
01/21/2010	200228359	PR	PR	Unsatisfactory			No
07/17/2009	200215075	PR	PR	Unsatisfactory			No
05/13/2009	200210315	PR	WO	Satisfactory			No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
300868	WELL	PR	06/01/2012	OW	073-06371	ALOHA MULA 1	PR <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

Lease Road:				
Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory	PARTIALLY ELEVATED GRAVEL ROAD THROUGH PASTURE WITH A CATTLE GUARD AT ENTRANCE.		

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	LEASE SIGN BY UNIT		
CONTAINERS	Satisfactory	STICKERS		
BATTERY	Satisfactory	BATTERY SIGN BY TANKS		
TANK LABELS/PLACARDS	Satisfactory	METAL SIGNS BY TANKS AND VESSELS		

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
STORAGE OF SUPL	Satisfactory	LOCATION IS A STORAGE YARD.		

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

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
LOCATION	Satisfactory	LOCATION FENCED WITH WIRE		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Vertical Separator	1	Satisfactory	3' X 20'		
Prime Mover	1	Satisfactory	M&M GAS ENGINE		

Ancillary equipment	15	Satisfactory	GAS SCRUBBER, CATHOTIC GENERATOR & RECTIFIER, CHEMICAL TANK W/BMP BY WELL. MULTIPLE CHEMICAL , FUEL & OIL TANKS W/BMP'S IN VARIOUS AREAS OF THE LOCATION. REFRIG UNIT, CAT GENERATOR		
Deadman # & Marked	4	Satisfactory			
Pump Jack	1	Satisfactory	456 LUFKIN		
Dehydrator	1	Satisfactory	CE NATCO		
Compressor	3	Satisfactory	3-VARIOUS SIZED ARIEL COMPRESSORS W/GAS ENGINE DRIVERS.		
Veritcal Heater Treater	2	Satisfactory	WITH METAL SHED		

Facilities:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
GLYCOL	1	OTHER	BV PLASTIC	39.158680,-103.597030
S/U/V:	Satisfactory	Comment:	100% BURIED 300 GALLON PLASTIC TANK FOR DEHY VENT.	
Corrective Action:				Corrective Date:

Paint

Condition	
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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
OTHER	2	OTHER	GAS PLANT	39.157970,-103.596150
S/U/V:	Satisfactory	Comment: 1-14000 GAL, 1-12000 GAL HIGH PRESSURE NGL TANKS FOR REFRIG UNIT.		
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action	Corrective Date
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Comment

Facilities:	<input type="checkbox"/> New Tank	Tank ID: _____
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Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	300 BBLS	FIBERGLASS AST	39.157900,-103.595790

S/U/V:	Satisfactory	Comment:
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Corrective Action:	Corrective Date:
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Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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

Corrective Action	Corrective Date
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Comment

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	5	300 BBLS	STEEL AST	39.157900,-103.595790	
S/U/V:	Satisfactory	Comment: CENTRAL BATTERY F/(ALOHA MULA 1, 2, 3)			
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	Adequate	
Corrective Action				Corrective Date	
Comment					
Venting:					
Yes/No		Comment			
NO					
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 300868

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/U/V: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:**S/U/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****S/U/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Stormwater:****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: 300868 Type: WELL API Number: 073-06371 Status: PR Insp. Status: PR

Producing Well

Comment: PRODUCING, CENTRAL BATTERY F/(ALOHA MULA 1, 2, 3)

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

Inspector Name: QUINT, CRAIG

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 _____ 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? Pass CM _____
CA _____ 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? Pass Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? _____

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

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? Pass

Production areas have been stabilized? Pass

Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____

Recontoured _____

Perennial forage re-established _____

Non-Cropland

Top soil replaced Pass

Recontoured Pass

80% Revegetation Pass

1003 f. Weeds Noxious weeds? _____ P _____

Inspector Name: QUINT, CRAIG

Comment: LOCATION IS USED FOR STORAGE YARD, UNUSED AREAS ARE COVERED WITH GRASS.

Overall Interim Reclamation Pass

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 _____ Well Release on Active Location ☐ 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	Gravel	Pass	MHSP	Fail	
		Ditches	Pass			

S/U/V: Unsatisfactory Corrective Date: 02/18/2014

Comment: CHEMICAL TANK BY WELL HAS INADEQUATE BERM.

CA: REPAIR BERM OR INSTALL CONTAINMENT (BMP).

Pits: ☐ NO SURFACE INDICATION OF PIT