

**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:

06/16/2014

Document Number:

673704102

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	237708	317278	Sherman, Susan	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 69760Name of Operator: PETRON DEVELOPMENT COMPANYAddress: 1899 W LITTLETON BLVDCity: LITTLETON State: CO Zip: 80120

- ☐ 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
Housey, Melissa		melissa.housey@state.co.us	COGCC OGLA
Crumley, Tim	(970) 768-5658	tcrumley@comcast.net	
Walker, Jimmy	(303) 794-5300	jim@petron.net	

Compliance Summary:QtrQtr: NWNE Sec: 15 Twp: 2N Range: 49W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
09/10/2012	663300542	PR	PR	SATISFACTORY	I		No
07/17/2008	200193860	PR	PR	SATISFACTORY			No
11/08/2007	200122117	PR	PR	SATISFACTORY			No
09/23/2004	200060575	PR	PR	ACTION REQUIRED		Fail	Yes
09/30/1997	500159871	ES	PR			Pass	No
09/22/1997	500159870	CO	PR			Pass	No
04/17/1997	500159869	ES	PR			Pass	No
04/16/1997	500159868	ES	PR			Fail	Yes
10/03/1995	500159867	PR	PR			Pass	No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
102627	PIT	AC	09/23/1999		-	CHANDLER 2-15	AC
102628	PIT	AC	09/23/1999		-	CHANDLER 2-15	AC
237708	WELL	PR	03/05/1993	OW	121-10211	CHANDLER 2-15	PR

Equipment:Location Inventory

Inspector Name: Sherman, Susan

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

<u>Signs/Marker:</u>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
CONTAINERS	SATISFACTORY			
BATTERY	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			
WELLHEAD	SATISFACTORY			

Emergency Contact Number (S/A/V): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

<u>Good Housekeeping:</u>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WEEDS		Pumper maintains weeds in the fall		

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

<u>Fencing/:</u>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
PUMP JACK	SATISFACTORY	steel pipe		

<u>Equipment:</u>					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Ancillary equipment	3	SATISFACTORY	2 REA poles, 1 chemical container		
Bird Protectors	2	SATISFACTORY			
Prime Mover	1	SATISFACTORY	electric		
Other	1	SATISFACTORY	stuffing box leak-no oil on ground (see attached photo)	fix leak	

Inspector Name: Sherman, Susan

Veritcal Heater Treater	1	SATISFACTORY	berms 40.14605, - 102.83258, maintain berm south of produced water tanks to prevent spills into produced water pit		
FWKO	1	SATISFACTORY			
Deadman # & Marked	4	SATISFACTORY			
Pump Jack	1	SATISFACTORY			

Facilities:

☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	300 BBLS	STEEL AST	,

S/A/V:		Comment:	same berms as treater
--------	--	----------	-----------------------

Corrective Action:		Corrective Date:	
--------------------	--	------------------	--

Paint

Condition	
-----------	--

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
-------------------	--	-----------------	--

Comment	
---------	--

Facilities:

☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	300 BBLS	FIBERGLASS AST	,

S/A/V:		Comment:	same berms as treater
--------	--	----------	-----------------------

Corrective Action:		Corrective Date:	
--------------------	--	------------------	--

Paint

Condition	
-----------	--

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
-------------------	--	-----------------	--

Comment	
---------	--

Inspector Name: Sherman, Susan

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CRUDE OIL	2	300 BBLS	STEEL AST	40.146530,-102.832570
S/A/V:	SATISFACTORY		Comment:	
Corrective Action:			Corrective Date:	
Paint				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) one tank labeled 300 and one 310				
Other (Type) _____				
Berms				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Inadequate	Walls Sufficient	Base Sufficient	Inadequate
Corrective Action	Maintain berms.			Corrective Date 07/07/2014
Comment				
Venting:				
Yes/No	Comment			
Flaring:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 237708

Site Preparation:

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

S/A/V: _____

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

Form 2A COAs:

S/A/V: _____ Comment: _____

CA: _____ Date: _____

Wildlife BMPs:

S/A/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: 237708 Type: WELL API Number: 121-10211 Status: PR Insp. Status: PR

Producing Well

Comment: Mar 2014 last reported production data.

Environmental**Spills/Releases:**

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

Comment: _____

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

Inspector Name: Sherman, Susan

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: **cropland, fallow**

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 REVEGETATION

Cropland

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

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Inspector Name: Sherman, Susan

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

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	Compaction	Pass	MHSP	Pass	
Gravel	Pass	Gravel	Pass			

S/A/V: SATISFACTOR
Y

Corrective Date:

Comment:

CA:

Pits: ☐ NO SURFACE INDICATION OF PIT

Inspector Name: Sherman, Susan

Pit Type: Skimming/Settling Lined: NO Pit ID: _____ Lat: 40.146110 Long: -102.832440

Lining:

Liner Type: _____ Liner Condition: _____

Comment: _____

Fencing:

Fencing Type: _____ Fencing Condition: _____

Comment: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: _____

Anchor Trench Present: _____ Oil Accumulation: YES 2+ feet Freeboard: _____

Pit (S/A/V): SATISFACTOR Comment: Oil sheen over whole pit and free oil in one corner (see attached photo). Skim pit requires cover unless kept free of oil.

Corrective Action: Remove oil from pit. Pumper removed oil on 6/17/2014 (verified on 6/19/2014). Date: 06/17/2014

Pit Type: Produced Water Lined: NO Pit ID: _____ Lat: 40.145530 Long: -102.832300

Lining:

Liner Type: _____ Liner Condition: _____

Comment: _____

Fencing:

Fencing Type: _____ Fencing Condition: _____

Comment: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: _____

Anchor Trench Present: _____ Oil Accumulation: NO 2+ feet Freeboard: _____

Pit (S/A/V): SATISFACTOR Comment: _____

Corrective Action: _____ Date: _____

COGCC Comments

Comment	User	Date
<u>Submit Form 4 to COGCC OGLA to update equipment inventory.</u>	ShermaSe	06/18/2014

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
673704161	Petron Chandler 2-15 well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3368969
673704162	Petron Chandler 2-15 well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3368970
673704163	Petron Chandler 2-15 well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3368971
673704164	Petron Chandler 2-15 well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3368972
673704165	Petron Chandler 2-15 well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3368973
673704167	Petron Chandler 2-15 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3368974
673704168	Petron Chandler 2-15 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3368975
673704170	Petron Chandler 2-15 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3368976
673704171	Petron Chandler 2-15 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3368977

Inspector Name: Sherman, Susan

673704172	Petron Chandler 2-15 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3368978
673704173	Petron Chandler 2-15 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3368979
673704174	Petron Chandler 2-15 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3368980
673704175	Petron Chandler 2-15 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3368981