

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:
06/12/2014

Document Number:
673501249

Overall Inspection:

ACTION REQUIRED

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>245250</u>	<u>408171</u>	<u>COSTA, RYAN</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>24461</u>
Name of Operator:	<u>DIVERSIFIED OPERATING CORPORATION</u>
Address:	<u>18121-C HAMPDEN AVENUE PMB 121</u>
City:	<u>AURORA</u> State: <u>CO</u> Zip: <u>80013</u>

- 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
RAMOS, MARTHA		martha.ramos@state.co.us	
WARBURTON, BILL	303-384-9611	wlw4@comcast.net	

Compliance Summary:

QtrQtr: <u>SWSE</u> Sec: <u>21</u> Twp: <u>8N</u> Range: <u>58W</u>							
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/06/2012	665400192	PA	PA	SATISFACTOR Y		Fail	No
12/30/2011	665400058	PA	PA	SATISFACTOR Y			No
09/20/2011	200323283	SR	PA	ACTION REQUIRED	F		Yes
09/20/2011	200323043	SR	PA	ACTION REQUIRED			Yes
06/07/2011	200312904	HR	PA	ACTION REQUIRED	F		Yes
01/04/2010	200226301	HR	PA	ACTION REQUIRED	F		Yes
08/24/2007	200117991	SR	PA	ACTION REQUIRED	F	Fail	Yes
10/04/2006	200097975	SR	PA	ACTION REQUIRED	F	Fail	Yes
06/19/2006	200093884	SR	PA	ACTION REQUIRED	F	Fail	Yes
08/16/2005	200076158	CA	PA	ACTION REQUIRED		Fail	No
08/12/2005	200075372	CA	PA	SATISFACTOR Y		Pass	Yes
02/25/2004	200050543	RT	SI	SATISFACTOR Y		Pass	No
04/15/2003	200037607	RT	AC	SATISFACTOR Y		Pass	No

Inspector Name: COSTA, RYAN

08/01/2002	200029323	RT	AC	SATISFACTOR Y		Pass	No
08/21/2001	200019155	RT	AC	SATISFACTOR Y		Pass	No
06/29/2000	200008066	MI	AC	SATISFACTOR Y		Pass	No
01/06/1997	500169408	ID	TA			Pass	No
12/16/1994	500169407	ID	TA				

Inspector Comment:

RECLAMATION INSPECTION

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
245250	WELL	PA	08/18/2005	OW	123-13045	SOONER UNIT 15-21	PA	<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

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
------	------	--------	-------------------	---------

Multiple Spills and Releases?

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 245250

Site Preparation:

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

S/AV: _____

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

Form 2A COAs:

S/AV: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AV: _____ **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: 245250 Type: WELL API Number: 123-13045 Status: PA Insp. Status: PA

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:

	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? _____ 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? _____

Comment: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

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

Final Land Use: _____

Reminder: _____

Comment: _____

Well plugged Pass Pit mouse/rat holes, cellars backfilled Pass

Debris removed Pass No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed Pass

Gravel removed Pass

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control Pass

Non cropland: Revegetated 80% Fail Cropland: perennial forage _____

Weeds present Pass Subsidence Pass

Comment: Vegetation cover and composition is adequate except where livestock feeding containers are located on the site creating disturbance from the livestock. Power poles have not yet been removed. SEE ATTACHED PHOTOS.

Corrective Action: SEE ADDITIONAL COMMENTS Date _____

Overall Final Reclamation **Fail** 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

S/A/V: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
Livestock feeding containers on site need to be removed to allow vegetation regrowth in this area. Coordinate with the land owner to have the feeding containers moved elsewhere.	CostaR	06/25/2014
Be advised power lines left in place will require a release requested by the surface owner and the producer and must be approved by the COGCC Director.	CostaR	06/24/2014
Site does not meet Final Reclamation rules of 1004. Another final reclamation/bond release inspection will not be conducted by COGCC until a form 4 is sent in for each well and/or facility with the following attachments; 1. An invoice and/or documentation showing that all work has been completed on the site that directly relates to the actions required on this inspection. 2. Photographs of the vegetation in four cardinal directions as well as one close up of the plant community. 3. Vegetation monitoring information conducted by a vegetation expert showing that the vegetation community meets the 80% standard in the rule. 4. Failure to complete the corrective actions as indicated in a prompt manner may result in enforcement actions.	CostaR	06/26/2014

Attached Documents

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

Document Num	Description	URL
673501276	EAST	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3374516
673501277	SOUTH	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3374517
673501278	NORTH	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3374518
673501279	NORTHEAST	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3374519