

**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:

06/12/2014

Document Number:

673501256

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	260398	409567	COSTA, RYAN	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 24461Name of Operator: DIVERSIFIED OPERATING CORPORATIONAddress: 18121-C HAMPDEN AVENUE PMB 121City: AURORA State: CO Zip: 80013

- ☐ 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
warburton, bill	303-384-9611	wlw4@comcast.net	
ramos, martha		martha.ramos@state.co.us	

Compliance Summary:QtrQtr: NESW Sec: 32 Twp: 8N Range: 60W

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	665400180	DA	DA	SATISFACTOR Y		Fail	No
12/30/2011	665400052	DA	DA	SATISFACTOR Y			No
09/26/2011	200323678	SR	DA	ACTION REQUIRED			Yes
06/13/2011	200315193	SR	PA	ACTION REQUIRED	F		Yes
05/04/2010	200246827	HR	PA	ACTION REQUIRED	F		Yes
03/23/2010	200237531	HR	PA	ACTION REQUIRED	F	Pass	Yes

Inspector Comment:**RECLAMATION INSPECTION****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
260398	WELL	DA	09/04/2004	DA	123-20472	SHOWERS 32-11	DA <input checked="" type="checkbox"/>

Equipment:Location Inventory

Inspector Name: COSTA, RYAN

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
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☐ Multiple Spills and Releases?

Venting:

Yes/No	Comment
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Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
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Predrill

Location ID: 260398

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: 260398 Type: WELL API Number: 123-20472 Status: DA Insp. Status: DA

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 : _____
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 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: _____

Reminder: _____

Comment: _____

Well plugged Pass Pit mouse/rat holes, cellars backfilled PassDebris removed Pass No disturbance /Location never built _____Access Roads Regraded _____ Contoured Pass Culverts removed PassGravel removed Pass

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

Compaction alleviation _____ Dust and erosion control PassNon cropland: Revegetated 80% Fail Cropland: perennial forage _____Weeds present In Process Subsidence PassComment: **Transects were conducted indicating that the site was not at 80% vegetation cover. SEE ATTACHED DATA RESULTS AND SITE PHOTOS**Corrective Action: **Interseed bare areas.** 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
<p>Site does not meet the 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;</p> <ol style="list-style-type: none"> 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	06/24/2014

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

Document Num	Description	URL
673501280	TRANSECT COVER DATA	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3374533
673501281	SITE PHOTOS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3374534