

**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:  
06/25/2014

Document Number:  
673704472

Overall Inspection:  
SATISFACTORY

**FIELD INSPECTION FORM**

|                     |               |               |                       |                          |             |
|---------------------|---------------|---------------|-----------------------|--------------------------|-------------|
| Location Identifier | Facility ID   | Loc ID        | Inspector Name:       | On-Site Inspection       | 2A Doc Num: |
|                     | <u>233472</u> | <u>316955</u> | <u>Sherman, Susan</u> | <input type="checkbox"/> |             |

**Operator Information:**

|                       |   |
|-----------------------|---|
| OGCC Operator Number: | <u>31257</u>  |
| Name of Operator:     | <u>FRITZLER RESOURCES INC</u>                         |
| Address:              | <u>P O BOX 114</u>                                    |
| City:                 | <u>FORT MORGAN</u> State: <u>CO</u> Zip: <u>80701</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 |
|----------------|----------------|-----------------------|---------|
| Fritzler, Gene | (970) 867-9388 | gfritzler@bresnan.net |         |

**Compliance Summary:**

QtrQtr: SWNE Sec: 21 Twp: 3S Range: 54W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 07/22/2013 | 668200536 | SI         | SI          | SATISFACTOR Y                 |          |                | No              |
| 07/16/2012 | 663400609 | SI         | SI          | ACTION REQUIRED               | P        |                | No              |
| 04/19/2011 | 200307885 | RT         | AC          | ACTION REQUIRED               |          |                | Yes             |
| 06/04/2010 | 200254329 | RT         | SI          | SATISFACTOR Y                 |          |                | Yes             |
| 07/15/2009 | 200215475 | MI         | AC          | SATISFACTOR Y                 |          |                | No              |
| 04/16/2008 | 200130359 | RT         | SI          | SATISFACTOR Y                 |          |                | No              |
| 03/12/2007 | 200106666 | RT         | SI          | SATISFACTOR Y                 |          | Pass           | No              |
| 05/04/2006 | 200090025 | RT         | SI          | SATISFACTOR Y                 |          | Pass           | No              |
| 07/29/2005 | 200075135 | RT         | AC          | SATISFACTOR Y                 |          | Pass           | No              |
| 07/14/2004 | 200057389 | MI         | SI          | SATISFACTOR Y                 |          | Pass           | No              |
| 07/16/2003 | 200041680 | RT         | AC          | SATISFACTOR Y                 |          | Pass           | No              |
| 04/03/2002 | 200025481 | RT         | AC          | SATISFACTOR Y                 |          | Pass           | No              |
| 02/25/2002 | 200024454 | RT         | AC          | SATISFACTOR Y                 |          | Pass           | No              |
| 08/09/2001 | 200018550 | MI         | AC          | SATISFACTOR Y                 |          | Pass           | No              |

Inspector Name: Sherman, Susan

|            |           |    |    |                  |  |      |    |
|------------|-----------|----|----|------------------|--|------|----|
| 08/08/2001 | 200018541 | RT | AC | SATISFACTOR<br>Y |  | Pass | No |
| 06/22/2000 | 200008051 | RT | AC | SATISFACTOR<br>Y |  | Pass | No |
| 07/28/1999 | 200024437 | MI | SI | SATISFACTOR<br>Y |  | Pass | No |
| 12/09/1998 | 500158337 | CO | AC |                  |  | Pass | No |

**Inspector Comment:**

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**Related Facilities:**

| Facility ID | Type            | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |                                     |
|-------------|-----------------|--------|-------------|------------|-----------|---------------|-------------|-------------------------------------|
| 150203      | UIC<br>DISPOSAL | AC     | 01/05/1987  |            | -         | WITTENBERG 3  | AC          | <input checked="" type="checkbox"/> |
| 233472      | WELL            | SI     | 08/06/2008  | IJ         | 121-05515 | WITTENBERG 3  | AC          | <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**

**Signs/Marker:**

| Type     | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|----------|------------------------------|---------|-------------------|---------|
| WELLHEAD | SATISFACTORY                 |         |                   |         |

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

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: 233472

**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: 150203 Type: UIC API Number: - Status: AC Insp. Status: AC

Facility ID: 233472 Type: WELL API Number: 121-05515 Status: SI Insp. Status: AC

**Underground Injection Control**

UIC Violation: \_\_\_\_\_

Maximum Injection Pressure: \_\_\_\_\_

UIC Routine

Inj./Tube: Pressure or inches of Hg \_\_\_\_\_  
(e.g. 30 psig or -30" Hg)

Previous Test Pressure \_\_\_\_\_

MPP \_\_\_\_\_

Inj Zone: JSND

TC: Pressure or inches of Hg \_\_\_\_\_

Previous Test Pressure \_\_\_\_\_

Last MIT: 07/15/2009

Brhd: Pressure or inches of Hg \_\_\_\_\_

Previous Test Pressure \_\_\_\_\_

AnnMTRReq: \_\_\_\_\_

Comment: \_\_\_\_\_

Method of Injection: PUMP FEED

Test Type: 5 Year

Tbg psi: 340

Csg psi: 25

BH psi: \_\_\_\_\_

Insp. Status: Pass

Comment: Initial-340 psi, 5 min-340 psi, 10 min-340 psi, 15 min-340 psi. O change in pressure. PASS.

**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 : \_\_\_\_\_ 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? \_\_\_\_\_ 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 \_\_\_\_\_ 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
|                  |                 |                         |                       |               |                          |         |

Inspector Name: Sherman, Susan

S/A/V: \_\_\_\_\_ Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

**Pits:**  NO SURFACE INDICATION OF PIT

**COGCC Comments**

| Comment  | User     | Date       |
|--|----------|------------|
| Berms and labels installed per 7/22/2013 inspection. | ShermaSe | 07/07/2014 |

**Attached Documents**

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

| Document Num | Description                             | URL   |
|--------------|---|---|
| 673704558    | Fritzler Wittenberg 3 well sign MIT     | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3382705">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3382705</a> |
| 673704559    | Fritzler Wittenberg 3 wellhead MIT      | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3382706">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3382706</a> |
| 673704646    | Fritzler Wittenberg 3 Form 21 6/25/2014 | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3382707">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3382707</a> |