

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
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Inspection Date:
09/26/2015

Document Number:
680600110

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>215534</u>	<u>325897</u>	<u>ROY, CATHERINE</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>10000</u>
Name of Operator:	<u>BP AMERICA PRODUCTION COMPANY</u>
Address:	<u>501 WESTLAKE PARK BLVD</u>
City:	<u>HOUSTON TX</u> State: <u>TX</u> Zip: <u>77079</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
		<u>SanJuanCOGCC@bp.com</u>	All Inspections
<u>Beebe, Sabre</u>		<u>Sabre.Beebe@bp.com</u>	All Inspections

Compliance Summary:

QtrQtr:	<u>NENW</u>	Sec:	<u>33</u>	Twp:	<u>35N</u>	Range:	<u>7W</u>
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
<u>11/14/2012</u>	<u>669400252</u>	<u>PR</u>	<u>PR</u>	<u>SATISFACTORY</u>	<u>P</u>		<u>No</u>
<u>11/08/2011</u>	<u>661700030</u>	<u>PR</u>	<u>PR</u>	<u>SATISFACTORY</u>			<u>No</u>
<u>04/16/2009</u>	<u>200208726</u>	<u>PR</u>	<u>PR</u>	<u>SATISFACTORY</u>			<u>No</u>
<u>08/29/2006</u>	<u>200101714</u>	<u>PR</u>	<u>PR</u>	<u>SATISFACTORY</u>		<u>Pass</u>	<u>No</u>
<u>01/04/2005</u>	<u>200066748</u>	<u>PR</u>	<u>PR</u>	<u>SATISFACTORY</u>		<u>Pass</u>	<u>No</u>
<u>06/24/2002</u>	<u>200028228</u>	<u>PR</u>	<u>PR</u>	<u>SATISFACTORY</u>		<u>Pass</u>	<u>No</u>
<u>11/17/1999</u>	<u>200002915</u>	<u>PR</u>	<u>PR</u>	<u>SATISFACTORY</u>		<u>Pass</u>	<u>No</u>
<u>03/25/1997</u>	<u>500149196</u>	<u>PR</u>	<u>PR</u>			<u>Pass</u>	<u>No</u>

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
<u>215534</u>	<u>WELL</u>	<u>PR</u>	<u>10/20/1988</u>	<u>GW</u>	<u>067-07139</u>	<u>MILLER FEDERAL 1</u>	<u>PR</u>

Equipment:

Location Inventory

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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
<input type="checkbox"/> Multiple Spills and Releases?				

Venting:	
Yes/No	Comment

Flaring:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 215534

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: 215534 Type: WELL API Number: 067-07139 Status: PR Insp. Status: PR

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: Revegetation is progressing within the interim reclamation area.

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? _____ 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? In 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? In

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 In

1003 f. Weeds Noxious weeds? _____ I _____

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

S/A/V: **ACTION REQUIRED** Corrective Date: **09/30/2015**

Comment: **Rills are forming along the northern edge of the well pad where concentrated flows exit the well pad surface. See attached photos.**

CA: **Stormwater BMPs are needed where concentrated flows are exiting the northern edge of the working surface.**

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
Overall this inspection is "Satisfactory". However, stormwater erosion needs to be controlled by September 30, 2015.	RoyC	09/02/2015

Attached Documents

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

Document Num	Description	URL
680600111	Inspection Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3675362