

**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

Inspection Date:

03/09/2016

Document Number:

685300116

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	214767	333539	St John, William (Cal)	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10000Name of Operator: BP AMERICA PRODUCTION COMPANYAddress: 380 AIRPORT RDCity: DURANGO State: CO Zip: 81303

- ☐ 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
Labowskie, Steve		steve.labowskie@state.co.us	
Beebe, Sabre	970-375-7530	Sabre.Beebe@bp.com	SW Inspection Reports
Inspections, All		SanJuanCOGCC@bp.com	SW Inspection Reports

Compliance Summary:QtrQtr: SWNW Sec: 34 Twp: 33N Range: 7W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
12/28/2011	661700077	PR	PR	SATISFACTORY			No
01/20/2009	200203059	PR	PR	SATISFACTORY			No
06/06/2007	200120503	PR	PR	SATISFACTORY			No
01/11/2006	200087725	PR	PR	SATISFACTORY		Pass	No
08/31/2004	200062944	PR	PR	SATISFACTORY		Pass	No
06/29/2001	200018985	PR	PR	SATISFACTORY		Pass	No
02/03/2000	200004285	PR	PR	SATISFACTORY		Pass	No
10/02/1998	500147866	HR	PA		P	Pass	No
04/14/1997	500147865	ID	SI			Pass	No
05/16/1994	500147864		SI				

Inspector Comment:

This report contains corrective action. Please see Good House Keeping section of report for additional comments.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
214767	WELL	PR	02/01/2011	GW	067-06371	MOFFETT B 1	PR	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Inspector Name: St John, William (Cal)

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

Lease Road:

Type	Satisfactory/Action Required	comment	Corrective Action	Date
Access	SATISFACTORY			

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
DEBRIS	ACTION REQUIRED	Steel pipe barrier pulled up and left at location entrance. See link at end of report for path to downloadable pictures.	Remove debris to comply with Rule 603.f using the Rule 603.f guidance document for further details.	04/11/2016

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	Panel		
SEPARATOR	SATISFACTORY	Panel - Includes Produced Water Tank		
OTHER	SATISFACTORY	Panel - Telemetry Equipment		
OTHER	SATISFACTORY	Panel - Electrical Equipment		
LOCATION	SATISFACTORY	Post and wire		

Equipment:			
Type: Ancillary equipment	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment	Wellhead		
Corrective Action		Date:	
Type: Flow Line	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	
Type: Horizontal Heated Separator	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	
Type: Bird Protectors	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	
Type: Ancillary equipment	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment	Water Can		
Corrective Action		Date:	
Type: Gas Meter Run	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____
Contents	#	Capacity	Type
PRODUCED WATER	1	<100 BBLS	PBV STEEL
S/AR	SATISFACTORY	Comment:	
Corrective Action:			Corrective Date:

Paint	
Condition	Adequate
Other (Content)	_____
Other (Capacity)	95 BBLS
Other (Type)	_____

Berms				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action				Corrective Date
Comment				

Venting:	
Yes/No	NO
Comment	

Flaring:

Type	Satisfactory/Action Required	
Comment:		
Corrective Action:		Correct Action Date:

Predrill

Location ID: 214767

Site Preparation:

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

S/AR: _____

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

Form 2A COAs:**S/AR:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****S/AR:** _____ **Comment:** _____**CA:** _____ **Date:** _____**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: 214767 Type: WELL API Number: 067-06371 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Environmental**Spills/Releases:**

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

Inspector Name: St John, William (Cal)

Comment: <input style="width:700px" type="text"/>			
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:			
<input style="width:300px" type="text"/>			
Sample Location: <input style="width:400px" type="text"/>			
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: <input style="width:750px" type="text"/>	
1003a. Waste and Debris removed? <u>Pass</u>	
CM _____	
CA _____	CA Date _____
Unused or unneeded equipment onsite? <u>Pass</u>	
CM _____	
CA _____	CA Date _____
Pit, cellars, rat holes and other bores closed? <u>Pass</u>	
CM _____	
CA _____	CA Date _____
Guy line anchors marked? _____	
CM _____	
CA _____	CA Date _____
1003b. Area no longer in use? <u>Pass</u>	Production areas stabilized ? <u>In</u>
1003c. Compacted areas have been cross ripped? <u>Pass</u>	
1003d. Drilling pit closed? <u>Pass</u> Subsidence over on drill pit? <u>Pass</u>	
Cuttings management: _____	
1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? <u>In</u>	
Production areas have been stabilized? <u>Pass</u>	Segregated soils have been replaced? <u>Pass</u>

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____	Recontoured _____	Perennial forage re-established _____
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Inspector Name: St John, William (Cal)

Non-Cropland

Top soil replaced Pass

Recontoured Pass

80% Revegetation In

1003 f. Weeds Noxious weeds? P

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
Gravel	Pass					
Berms	Pass	Gravel	Pass			
Compaction	Pass	Compaction	Pass			

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment:

CA:

Pits: ☒ NO SURFACE INDICATION OF PIT

Attached Documents

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

Document Num	Description	URL
685300127	Post and Pipe	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3803077
685300128	Scrap Barrier	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3803078