

**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:

05/23/2016

Document Number:

673713206

Overall Inspection:

SATISFACTORY

**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	204006	320625	Sherman, Susan	<input type="checkbox"/>	

**Operator Information:**

OGCC Operator Number:	41550
Name of Operator:	TYLER ROCKIES EXPLORATION LTD
Address:	P O BOX 119
City:	TYLER
State:	TX
Zip:	75710-

- 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
Strawn, Mark	(930) 595-4886	texcomo@sbcglobal.net	
Quint, Craig		craig.quint@state.co.us	COGCC Supervisor
Hall, Dan	(303) 966-9610	dan@energyop.com	
Behrens, Vic	(303) 810-6382	behrens@netecin.net	

**Compliance Summary:**

QtrQtr: SWSE		Sec: 29		Twp: 4S		Range: 60W	
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
04/30/2015	673710299	SI	SI	SATISFACTORY			No
06/06/2014	673703802	SI	SI	SATISFACTORY			No
06/19/2013	668300383	SI	UN	SATISFACTORY	P		No
07/30/2012	667600595	IJ	IJ	SATISFACTORY	P		No
08/18/2011	200318974	RT	AC	SATISFACTORY			No
08/06/2010	200266117	MI	PR	SATISFACTORY			No
04/15/2010	200250386	SR	AC	SATISFACTORY			No
08/20/2009	200217007	RT	AC	SATISFACTORY			No
08/11/2008	200194198	RT	AC	SATISFACTORY			No
07/13/2007	200114646	RT	IO	SATISFACTORY		Pass	No
06/20/2006	200093853	RT	SI	SATISFACTORY		Pass	No
07/26/2005	200074229	MI	TA	SATISFACTORY		Pass	No
08/03/2004	200057558	RT	TA	SATISFACTORY		Pass	No
08/19/2003	200042999	RT	TA	SATISFACTORY		Pass	No
06/11/2002	200027262	RT	TA	SATISFACTORY		Pass	No
07/11/2001	1065388	RT	TA	ACTION REQUIRED		Fail	Yes
08/02/2000	896120	MI	TA	SATISFACTORY		Pass	No
07/23/1999	500134087	ID	AC			Fail	Yes

**Inspector Comment:**  
 \_\_\_\_\_  
 \_\_\_\_\_

**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
204006	WELL	SI	12/01/2014	ERIW	005-06089	PEORIA J-SAND UNIT 27	SI	<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**

**Lease Road:**

Type	Satisfactory/Action Required	comment	Corrective Action	Date

**Signs/Marker:**

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

Emergency Contact Number (S/AR): SATISFACTORY Corrective Date: \_\_\_\_\_  
 Comment: \_\_\_\_\_  
 Corrective Action: \_\_\_\_\_

**Good Housekeeping:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

**Spills:**

Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

**Fencing/:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	steel panels		

**Equipment:**

Type: Deadman # & Marked	# 4	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date: _____

**Facilities:**  New Tank Tank ID: \_\_\_\_\_

Inspector Name: Sherman, Susan

Contents	#	Capacity	Type	SE GPS
			CENTRALIZED BATTERY	,
S/AR	Comment:			
Corrective Action:				Corrective Date:

**Paint**

Condition	
Other (Content)	_____
Other (Capacity)	_____
Other (Type)	_____

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				

**Venting:**

Yes/No	
Comment	

**Flaring:**

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

**Predrill**

Location ID: 204006

Lease Road Adeq.: \_\_\_\_\_ Pads: \_\_\_\_\_ Soil Stockpile: \_\_\_\_\_

S/AR: \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:**

S/AR: SATISFACTORY **Comment:** No COAs.

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: 204006 Type: WELL API Number: 005-06089 Status: SI Insp. Status: SI

**Underground Injection Control**

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

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

UIC Routine

Inj./Tube: Pressure or inches of Hg ~1" Hg \_\_\_\_\_  
(e.g. 30 psig or -30" Hg)

Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
Inj Zone: JSND

TC: Pressure or inches of Hg 0 \_\_\_\_\_

Previous Test Pressure \_\_\_\_\_ Last MIT: 06/06/2014

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

Previous Test Pressure \_\_\_\_\_ AnnMTRReq: \_\_\_\_\_

Comment: **SI.** \_\_\_\_\_

Method of Injection: \_\_\_\_\_

Test Type: \_\_\_\_\_

Tbg psi: \_\_\_\_\_

Csg psi: \_\_\_\_\_

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

Insp. Status: \_\_\_\_\_

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

**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: **open range** \_\_\_\_\_

1003a. Waste and Debris removed? Pass

CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Unused or unneeded equipment onsite? Pass

CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Pit, cellars, rat holes and other bores closed? Pass  
 CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_

Guy line anchors marked? Pass  
 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
Other	Pass					vegetation

Inspector Name: Sherman, Susan

Compaction	Pass	Compaction	Pass			
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S/A/V: SATISFACTOR Corrective Date: \_\_\_\_\_

Y

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

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

Pits:  NO SURFACE INDICATION OF PIT

**COGCC Comments**

Comment	User	Date
Routine UIC.	ShermaSe	05/23/2016

**Attached Documents**

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

Document Num	Description	URL
673713212	Tyler Rockies Exploration LTD, Peoria J-Sand Unit 27	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3863390">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3863390</a>