

**FORM
INSP**Rev
X/15**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:

10/24/2016

Submitted Date:

10/24/2016

Document Number:

673714227**FIELD INSPECTION FORM**
 Loc ID 316957 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num: _____
Operator Information:OGCC Operator Number: 10548Name of Operator: HRM RESOURCES II LLCAddress: 410 17TH STREET #1600City: DENVER State: CO Zip: 80202**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED

Findings:15 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Prohaska, April	(303) 996-8697	aprohaska@hrmres.com	
Hutson, L. Roger	(303) 893-6621	lrhutson@hrmres.com	
Pape, Terry	(970) 768-5700	tpape@hrmres.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
233483	WELL	PR	10/22/2003	OW	121-05527	ANN ALLISON 1	PR

General Comment:

Location

Lease Road:			
Type	Access		
comment:	See Stormwater tab for details.		
Corrective Action	L	Date:	

Overall Good: ☐

Signs/Marker:			
Type	OTHER		
Comment:	treater		
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	CONTAINERS		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 720-836-6046

Corrective Action:

Date: _____

Good Housekeeping:

Type	WEEDS		
Comment:	Control weeds on access road and tank battery.		
Corrective Action:		Date:	

Overall Good: ☐

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Equipment:			corrective date
Type: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
Type: Ancillary equipment	# 3		
Comment:	2 REA poles (3 phase), chemical container at wellhead		
Corrective Action:		Date:	

Type: Vertical Heater Treater	# 1	
Comment:	shed, propane tank, bermed, GPS 39.78087, -103.42038	
Corrective Action:		Date:
Type: Deadman # & Marked	# 4	
Comment:		
Corrective Action:		Date:
Type: Bird Protectors	# 3	
Comment:	two on crude oil tank and one on treater	
Corrective Action:		Date:
Type: Prime Mover	# 1	
Comment:	electric motor	
Corrective Action:		Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tanak ID	SE GPS
PRODUCED WATER	1	OTHER	FIBERGLASS AST		
Comment:					
Corrective Action:					Date:

Paint

Condition	Adequate
Other (Content)	
Other (Capacity)	210 bbls
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:	same berms as crude oil tanks			
Corrective Action:				Date:

Contents	#	Capacity	Type	Tanak ID	SE GPS
CRUDE OIL	2	500 BBLS	STEEL AST		39.780780,-103.419820
Comment:	bolted tanks				
Corrective Action:					Date:

Paint

Condition	Adequate
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficent	Base Sufficent	Adequate
Comment:				

Corrective Action:		Date:	
--------------------	--	-------	--

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Location Construction

Location ID: 233483

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

Comment: _____

Corrective Action: _____ Date: _____

Form 2A COAs:**Comment:** No COAs.Corrective Action: _____ **Date:** _____**Wildlife BMPs:****Comment:** _____Corrective Action: _____ **Date:** _____**Comment:** _____**Corrective Action:** _____ **Date:** _____**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:

--

Inspected FacilitiesFacility ID: 233483 Type: WELL API Number: 121-05527 Status: PR Insp. Status: PR**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____Comment: Jul 2016 reported to COGCC database as SI.

Corrective Action: _____ Date: _____

Reclamation - Storm Water - Pit**Interim Reclamation:**

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: [CRP](#)**1002 SITE PREPARATION AND STABILIZATION**

1002a. FENCING _____

Comment _____

Corrective Action _____

Date _____

1002b. SOIL REMOVAL AND
SEGREGATION _____

Comment _____

Corrective Action _____

Date _____

1002c. PROTECTION OF SOILS _____

Comment _____

Corrective Action _____

Date _____

1002E. SURFACE DISTURBANCE MINIMIZATION _____

Comment _____

Corrective Action _____

Date _____

1003a. Waste and Debris removed? Pass

Comment _____

Corrective Action _____

Date _____

Unused or unneeded equipment onsite? Pass

Comment _____

Corrective Action _____

Date _____

Pit, cellars, rat holes and other bores closed? Pass

Comment _____

Corrective Action _____

Date _____

Guy line anchors marked? Pass

Comment _____

Corrective Action _____

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 _____

1003e. INTERIM VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

1003 f. Weeds Noxious weeds? _____

Comment _____

Corrective Action _____ Date _____

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 _____

1004.d. FINAL VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

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
Compaction		Compaction		Material Handling And Spill Prevention	Pass	
Ditches	Pass	Rip Rap	In Process			
Gravel	Pass	Gravel	Pass			

Comment: [Erosion rill forming on north side of treater berms. Rip rap was installed on road, maintenance needed on road. Ditch around all pits.](#)

Corrective Action:

Date: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

Type: Produced Water Lined: NO Pit ID: _____ Lat: 39.780430 Long: -103.420360

Reference Point: SE Other: _____ Length: 50 Width: 50

Lining:

Liner Type: _____ Liner Condition: _____

Comment:

Corrective Action

Date: cFencing:

Fencing Type: None Fencing Condition: _____

Comment:

Corrective Action

Date: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment:

Corrective Action

Date: _____

Anchor Trench Present: _____ Oil Accumulation: NO 2+ feet Freeboard: _____

Comment:

Corrective Action

Date: _____

Type: Produced Water Lined: NO Pit ID: _____ Lat: 39.779910 Long: -103.420420

Reference Point: NE Other: _____ Length: 120 Width: 150

Lining:

Liner Type: _____ Liner Condition: _____

Comment:

Corrective Action

Date: cFencing:

Fencing Type: None Fencing Condition: _____

Comment:

Corrective Action

Date: _____

Netting:

Netting Type:

Netting Condition:

Comment:

Corrective
Action

Date:

Anchor Trench Present:

Oil Accumulation: NO

2+ feet Freeboard:

Comment:

[Discharge outfall GPS 39.77983, -103.42073](#)Corrective
Action

Date:

Type: Produced WaterLined: NO

Pit ID:

Lat: 39.780470Long: -103.420580Reference Point: SE

Other: _____

Length: 60Width: 70Lining:

Liner Type:

Liner Condition:

Comment:

Corrective
ActionDate: cFencing:Fencing Type: None

Fencing Condition:

Comment:

Corrective
Action

Date:

Netting:

Netting Type:

Netting Condition:

Comment:

Corrective
Action

Date:

Anchor Trench Present:

Oil Accumulation: NO

2+ feet Freeboard:

Comment:

Corrective
Action

Date:

Type: Produced WaterLined: NO

Pit ID:

Lat: 39.780280Long: -103.420380Reference Point: SE

Other: _____

Length: 70Width: 160Lining:

Liner Type:

Liner Condition:

Comment:

Corrective
ActionDate: cFencing:Fencing Type: None

Fencing Condition:

Comment:

Corrective
Action

Date:

Netting:

Netting Type:

Netting Condition:

Comment:

Corrective Action		Date:
Anchor Trench Present: Oil Accumulation: <u>NO</u> 2+ feet Freeboard:		
Comment:		
Corrective Action		Date:
Type: <u>Produced Water</u>	Lined: <u>NO</u>	Pit ID: Lat: <u>39.779860</u> Long: <u>-103.419930</u>
Reference Point: <u>SE</u>	Other: _____	Length: <u>250</u> Width: <u>120</u>
<u>Lining:</u>		
Liner Type:	Liner Condition:	
Comment:		
Corrective Action		Date: <u>c</u>
<u>Fencing:</u>		
Fencing Type: <u>None</u>	Fencing Condition:	
Comment:		
Corrective Action		Date:
<u>Netting:</u>		
Netting Type:	Netting Condition:	
Comment:		
Corrective Action		Date:
Anchor Trench Present: Oil Accumulation: <u>NO</u> 2+ feet Freeboard:		
Comment:		
Corrective Action		Date:
Monitoring:	Monitoring Type	Comment`

Attached Documents

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

Document Num	Description	URL
673714227	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3988072
673714231	HRM Ann Allison 1	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3983672