

**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:
10/25/2016
Submitted Date:
10/30/2016
Document Number:
673714242

FIELD INSPECTION FORM

Loc ID _____ Inspector Name: _____ On-Site Inspection
309657 _____ Sherman, Susan _____ 2A Doc Num: _____

Status Summary:

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

Operator Information:

OGCC Operator Number: 10399
Name of Operator: NIGHTHAWK PRODUCTION LLC
Address: 1805 SHEA CENTER DR #290
City: HIGHLANDS State: CO Zip: 80129

Findings:

16 Number of Comments
0 Number of Corrective Actions
 Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Spear, Sam	(970) 554-1988	samspear@nighthawkenegy.com	
Henkin, Joyce	(303) 407-9609	joycehenkin@nighthawkenegy.com	
Rezendes, Joe		JoeRezendes@nighthawkenegy.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
300637	WELL	PR	11/19/2013	OW	073-06365	CRAIG 12-33	TA

General Comment:

(This area is intentionally left blank for general comments.)

Location

Overall Good:

Signs/Marker:

Type	WELLHEAD		
Comment:	on ground		
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 303-638-6096

Corrective Action:

Date: _____

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:

Type	IGNITOR/COMBUSTOR		
Comment:	ECD removed but steel panels still in place with concrete pad in center		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	steel panels		
Corrective Action:		Date:	
Type	TANK BATTERY		
Comment:	metal berms have barbed wire on top		
Corrective Action:		Date:	
Type	SEPARATOR		
Comment:	metal berms have barbed wire on top		
Corrective Action:		Date:	

Equipment:

Type: Deadman # & Marked	# 4		corrective date
Comment:			
Corrective Action:		Date:	
Type: Pump Jack	# 1		

Comment:	horses head off	Date:	
Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment:	gas engine, day tank requires label and secondary containment	Date:	
Corrective Action:		Date:	
Type: Vertical Heater Treater	# 1		
Comment:	metal berms, GPS 38.87057, -103.56927, bird protector, empty chemical container with secondary containment	Date:	
Corrective Action:		Date:	
Type: Bird Protectors	#		
Comment:	6	Date:	
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tanak ID	SE GPS
CRUDE OIL	4	400 BBLs	STEEL AST		38.870720,-103.569490
Comment:	1 enardo valve, gas scrubber				
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:				Date:

Contents	#	Capacity	Type	Tanak ID	SE GPS
PRODUCED WATER	4	200 BBLs	STEEL AST		
Comment:	1 enardo valve, 4 smoke stacks with bird protectors, paint wearing off tanks, electric panel for tanks				
Corrective Action:					Date:

Paint

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

Berms

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

Corrective Action:		Date:	
Venting:			
Yes/No			
Comment:			
Corrective Action:		Date:	
Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Location Construction

Location ID: 300637

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

Comment: _____

Corrective Action: _____ Date: _____

Form 2A COAs:

Comment:

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 Facilities

Facility ID: 300637 Type: WELL API Number: 073-06365 Status: PR Insp. Status: TA

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment: Last MIT on 10/16/2015.

Corrective Action: _____ Date: _____

Flowline

#1	Type: Well Site	of Lines
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Flowline Description

Flowline Type: Well Site Size: _____ Material: _____
 Variance: _____ Age: _____ Contents: _____

Integrity Summary

Failures: _____ Spills: _____ Repairs Made: _____
 Coatings: _____ H2S: _____ Cathodic Protection: _____

Pressure Testing

Witnessed: _____ Test Result: _____ Charted: _____

COGCC Rules(check all that apply)

1101. Installation and Reclamation 1102. Operations, Maintenance, and Repair 1103. Abandonment

Comment: 63 psi

Corrective Action: _____ Date: _____

Reclamation - Storm Water - Pit

Interim Reclamation:

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

Land Use: _____

Comment: _____

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 REVEGETATION

Cropland

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
		Ditches	Pass			
		Culverts	Pass			
		Rip Rap	Pass			
Gravel	Pass	Gravel	Pass			
Compaction	Pass	Compaction	Pass			

Comment:

Corrective Action:

Date: _____

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
673714242	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3994307
673714295	Nighthawk Craig 12-33	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3988006