

**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:
11/16/2016
Submitted Date:
11/18/2016
Document Number:
673714420

FIELD INSPECTION FORM

Loc ID 317166 Inspector Name: Sherman, Susan On-Site Inspection 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: 94300
Name of Operator: WARD & SON* ALFRED
Address: P O BOX 737
City: OGALLALLA State: NE Zip: 69153

Findings:

- 16 Number of Comments
- 2 Number of Corrective Actions
- Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Ward, Randy	(308) 284-8350	rlwardne@charter.net	
Crumley, Luke	(970) 324-0060	crumleypumping@gmail.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
236964	WELL	PR	12/13/1979	OW	121-09464	WRIGHT 31-1	PR

General Comment:

Location

Overall Good:

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

Emergency Contact Number:			
Comment:	308-280-0100		
Corrective Action:		Date:	_____

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment: _____

Multiple Spills and Releases?

Fencing/:			
Type	SEPARATOR		
Comment:	cattle wire fence panels		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	cattle wire fence panels		
Corrective Action:		Date:	
Type	TANK BATTERY		
Comment:	barbed wire		
Corrective Action:		Date:	

Equipment:			corrective date
Type: Bird Protectors	# 1		
Comment:	on VHT		
Corrective Action:		Date:	
Type: Ancillary equipment	# 3		

Comment:	chemical container at wellhead, 2 Y-W poles, 3 phase	Date:	
Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment:	electric motor, electric panel	Date:	
Corrective Action:		Date:	
Type: Pump Jack	# 1		
Comment:	35 psi on casing	Date:	
Corrective Action:		Date:	
Type: Vertical Heater Treater	# 1		
Comment:	shed, concrete pad, metal berms, GPS 39.82734, -103.35017, propane tank	Date:	
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:		Date:	
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tanak ID	SE GPS
PRODUCED WATER	1	300 BBLS	STEEL AST		39.827550,-103.350260
Comment:					
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Inadequate	Walls Sufficient	Base Sufficient	Inadequate
Comment:	Cattle hoof prints in berms.			
Corrective Action:	Maintain earth berms around produced water tanks.			Date: 12/19/2016

Contents	#	Capacity	Type	Tanak ID	SE GPS
PRODUCED WATER	1	200 BBLS	FIBERGLASS AST		
Comment:	No quantity label on tank.				
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Comment:		same berms as 300 BBL produced water tank.				Date:	
Corrective Action:						Date:	
Contents	#	Capacity	Type	Tanak ID	SE GPS		
CRUDE OIL	2	300 BBLs	STEEL AST		39.826970,-103.350140		
Comment:						Date:	
Corrective Action:						Date:	
Paint							
Condition							
Other (Content)							
Other (Capacity)							
Other (Type)							
Berms							
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance			
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate			
Comment:						Date:	
Corrective Action:						Date:	
Venting:							
Yes/No						Date:	
Comment:						Date:	
Corrective Action:						Date:	
Flaring:							
Type							
Comment:							
Corrective Action:						Date:	

Location Construction

Location ID: 236964 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 Facilities

Facility ID: 236964 Type: WELL API Number: 121-09464 Status: PR Insp. Status: PR

Producing Well

Comment: [PR. Aug 2016 reported to COGCC database.](#)

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
Compaction	Pass	Compaction	Pass	Material Handling And Spill Prevention	Pass	
Gravel	Pass	Gravel	Pass			

Comment: _____

Corrective Action: _____

Date: _____

Pits: NO SURFACE INDICATION OF PIT

Type: Produced Water Lined: NO Pit ID: _____ Lat: 39.827670 Long: -103.350110

Reference Point: SE Other: _____ Length: 100 Width: 100

Lining:

Liner Type: _____ Liner Condition: _____

Comment: _____

Corrective Action _____

Date: c

Fencing:

Fencing Type: Livestock Fencing Condition: Adequate

Comment: _____

Corrective Action _____

Date: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: _____

Corrective Action _____

Date: _____

Anchor Trench Present: _____ Oil Accumulation: _____ 2+ feet Freeboard: _____

Comment: _____

Corrective Action _____

Date: _____

Type: Skimming/Settling Lined: NO Pit ID: _____ Lat: _____ Long: _____

Reference Point: SE Other: _____ Length: 40 Width: 15

Lining:

Liner Type: _____ Liner Condition: _____

Comment: _____

Corrective Action _____

Date: c

Fencing:

Fencing Type: Livestock Fencing Condition: Adequate

Comment: _____

Corrective Action _____

Date: _____

Netting:

Netting Type: Metal Grid Netting Condition: Good

Comment:		Date:
Corrective Action		
Anchor Trench Present:	Oil Accumulation: <u>NO</u>	2+ feet Freeboard:
Comment:	Not it use/under remediation. No Form 27 on file.	
Corrective Action	Contact COGCC EPS.	Date: <u>12/02/2016</u>

Attached Documents

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

Document Num	Description	URL
673714448	Ward Wright 31-1	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4007387