

**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:

06/06/2017

Submitted Date:

06/08/2017

Document Number:

674005309**FIELD INSPECTION FORM**

Loc ID 320481 Inspector Name: Carlile, Craig On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10110Name of Operator: GREAT WESTERN OPERATING COMPANY LLCAddress: 1801 BROADWAY #500City: DENVER State: CO Zip: 80202**Status Summary:**

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

Findings:6 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
,		cogccinspections@gwogco.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
258193	WELL	PR	05/29/2001	GW	001-09427	SELTZER PP 4-8	SI

General Comment:

2017 Flowline NTO Inspection 1000' Buffer
Shadowing Operator Pressure Testing Team

LocationOverall Good: ☒

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

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good: ☒

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:	Pipe		
Corrective Action:		Date:	

Equipment:			corrective date
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	
Type: Flow Line	#		
Comment:	Wellhead: 1-2 Inch Steel Separator (SE Corner 39.99539, -104.8852): 5-2 Inch Steel Tank Battery: 1-2 Inch Steel		
Corrective Action:		Date:	
Type: Bird Protectors	# 1		
Comment:			
Corrective Action:		Date:	
Type: Plunger Lift	# 1		
Comment:			

Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS	
CRUDE OIL	1	OTHER	STEEL AST		39.995390,-104.885200	
Comment:						
Corrective Action:						Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)	268 Bbl	
Other (Type)		

Berms

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

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			
		Date:	

Flaring:

Type			
Comment:			
Corrective Action:			
		Date:	

Inspected FacilitiesFacility ID: 258193 Type: WELL API Number: 001-09427 Status: PR Insp. Status: SI**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

Comment: _____

Corrective Action: _____ Date: _____

BradenHeadComment: Bradenhead plumbed to the surface.

Corrective Action: _____ Date: _____

Flowline

#1	Type:	of Lines
Flowline Description		
Flowline Type:	Size:	Material:
Variance:	Age:	Contents:
Integrity Summary		
Failures:	Spills:	Repairs Made:
Coatings:	H2S:	Cathodic Protection:
Pressure Testing		
Witnessed: <u>Yes</u>	Test Result: <u>Pass</u>	Charted: <u>Yes</u>
COGCC Rules(check all that apply)		
<input type="checkbox"/> <u>1101. Installation and Reclamation</u>	<input type="checkbox"/> <u>1102. Operations, Maintenance, and Repair</u>	<input type="checkbox"/> <u>1103. Abandonment</u>
Comment: _____		Date: _____
Corrective Action: _____		

Flowline Description

Flowline Type: _____ Size: _____ Material: _____

Variance: _____ Age: _____ Contents: _____

Integrity Summary

Failures: _____ Spills: _____ Repairs Made: _____

Coatings: _____ H2S: _____ Cathodic Protection: _____

Pressure TestingWitnessed: Yes Test Result: Pass Charted: YesCOGCC Rules(check all that apply)☐ 1101. Installation and Reclamation ☐ 1102. Operations, Maintenance, and Repair ☐ 1103. Abandonment

Comment: _____

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? _____

Comment _____

Corrective Action _____

Date _____

Guy line anchors marked? _____

Comment _____

Corrective Action _____

Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? Pass

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
Gravel	Pass					

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**COGCC Comments**

Comment	User	Date
Flow line pressure test witness.	carlilec	06/06/2017

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

Document Num	Description	URL
401304393	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4166596
674005310	Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4166580
674005339	Bypass	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4166581
674005340	Flowline	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4166582
674005341	Sales Line	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4166583