

**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:

06/29/2017

Submitted Date:

06/30/2017

Document Number:

673715673

FIELD INSPECTION FORM

Loc ID _____ Inspector Name: _____ On-Site Inspection
320694 _____ 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: 19035
Name of Operator: OVERLAND RESOURCES LLC
Address: SUITE C18 PMB 440
City: GREENWOOD State: CO Zip: 80121

Findings:

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

Contact Information:

Contact Name	Phone	Email	Comment
Pandolfo, Chris	(650) 387-6506	cpandolfo@gmail.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
204484	WELL	PR	06/01/2012	OW	005-06569	Cox #1-A 05-005-06569	EG

General Comment:

[2017 Flowline NTO Inspection 1000' Buffer Shadowing Operator Pressure Testing Team](#)

Location

Overall Good:

Signs/Marker:

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

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 204484 Type: WELL API Number: 005-06569 Status: PR Insp. Status: EG

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment: Shut in since Mar 2013. Contact COGCC Engineering.

Corrective Action: _____ Date: _____

Flowline

#1	Type:Well Site	of Lines
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Flowline Description

Flowline Type: Well Site Size: 2" Material: Carbon Steel
 Variance: _____ Age: _____ Contents: _____

Integrity Summary

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

Pressure Testing

Witnessed: Yes Test Result: Pass Charted: No

COGCC Rules(check all that apply)

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

Comment: Flowline test from well to treater. 0 psi prior to test.
0 min 39 psi
5 min 38 psi
10 min 37 psi
15 min 37 psi
0 psi after test

Corrective Action: _____ Date: _____

#1	Type:Well Site	of Lines
----	----------------	----------

Flowline Description

Flowline Type: Well Site Size: 2" Material: Carbon Steel
 Variance: _____ Age: _____ Contents: _____

Integrity Summary

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

Pressure Testing

Witnessed: Yes Test Result: Pass Charted: No

COGCC Rules(check all that apply)

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

Comment: Flowline test from well to treater. 0 psi prior to test.
0 min 39 psi
5 min 38 psi
10 min 37 psi
15 min 37 psi
0 psi after test

Corrective Action: _____ Date: _____

#2	Type:Sales Line	of Lines	
<u>Flowline Description</u>			
Flowline Type: <u>Sales Line</u>		Size: <u>2"</u>	Material: <u>Carbon Steel</u>
Variance:		Age:	Contents:
<u>Integrity Summary</u>			
Failures:		Spills:	Repairs Made:
Coatings:		H2S:	Cathodic Protection:
<u>Pressure Testing</u>			
Witnessed: <u>Yes</u>		Test Result:	Charted: <u>No</u>
<u>COGCC Rules(check all that apply)</u>			
<input type="checkbox"/> 1101. Installation and Reclamation		<input checked="" type="checkbox"/> 1102. Operations, Maintenance, and Repair	<input type="checkbox"/> 1103. Abandonment
<u>Comment:</u>		Flowline test from treater to gas meter line (no gas meter on location). 0 psi prior to test. 0 min 17 psi 5 min 15 psi 10 min 15 psi 15 min 15 psi 0 psi after test	
Corrective Action:			Date:

#2	Type:Sales Line	of Lines	
<u>Flowline Description</u>			
Flowline Type: <u>Sales Line</u>		Size: <u>2"</u>	Material: <u>Carbon Steel</u>
Variance:		Age:	Contents:
<u>Integrity Summary</u>			
Failures:		Spills:	Repairs Made:
Coatings:		H2S:	Cathodic Protection:
<u>Pressure Testing</u>			
Witnessed: <u>Yes</u>		Test Result:	Charted: <u>No</u>
<u>COGCC Rules(check all that apply)</u>			
<input type="checkbox"/> 1101. Installation and Reclamation		<input checked="" type="checkbox"/> 1102. Operations, Maintenance, and Repair	<input type="checkbox"/> 1103. Abandonment
<u>Comment:</u>		Flowline test from treater to gas meter line (no gas meter on location). 0 psi prior to test. 0 min 17 psi 5 min 15 psi 10 min 15 psi 15 min 15 psi 0 psi after test	
Corrective Action:			Date:

#3	Type:Dump Line	of Lines	
<u>Flowline Description</u>			
Flowline Type: <u>Dump Line</u>		Size: <u>2"</u>	Material: <u>Carbon Steel</u>
Variance:		Age:	Contents:
<u>Integrity Summary</u>			
Failures:		Spills:	Repairs Made:
Coatings:		H2S:	Cathodic Protection:
<u>Pressure Testing</u>			

Witnessed: Yes

Test Result: Pass

Charted: No

COGCC Rules(check all that apply)

1101. Installation and Reclamation

1102. Operations, Maintenance, and Repair

1103. Abandonment

Comment: Flowline test from treater to hot oil line. 0 psi prior to test.
0 min 22 psi
5 min 22 psi
10 min 22 psi
15 min 22 psi
0 psi after test

Corrective Action:

Date:

#3 Type: Dump Line

of Lines

Flowline Description

Flowline Type: Dump Line

Size: 2"

Material: Carbon Steel

Variance:

Age:

Contents:

Integrity Summary

Failures:

Spills:

Repairs Made:

Coatings:

H2S:

Cathodic Protection:

Pressure Testing

Witnessed: Yes

Test Result: Pass

Charted: No

COGCC Rules(check all that apply)

1101. Installation and Reclamation

1102. Operations, Maintenance, and Repair

1103. Abandonment

Comment: Flowline test from treater to hot oil line. 0 psi prior to test.
0 min 22 psi
5 min 22 psi
10 min 22 psi
15 min 22 psi
0 psi after test

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? _____

Comment

Corrective Action

Date _____

Unused or unneeded equipment onsite? _____

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 ? _____
 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

Attached Documents

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

Document Num	Description	URL
401327955	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4186823
673715683	Overland Cox #1-A 05-005 -06569	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4186809