

**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:

10/11/2017

Submitted Date:

10/11/2017

Document Number:

688300455**FIELD INSPECTION FORM**

Loc ID 336752 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_

**Operator Information:**OGCC Operator Number: 10112Name of Operator: FOUNDATION ENERGY MANAGEMENT LLCAddress: 5057 KELLER SPRINGS RD STE 650City: ADDISON State: TX Zip: 75001**Status Summary:**

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

**Findings:**13 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name      | Phone          | Email                           | Comment                         |
|-------------------|----------------|---------------------------------|---------------------------------|
| Foundation Energy | (866) 767-3600 | regulatory@foundationenergy.com | <a href="#">All Inspections</a> |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 278967      | WELL | PR     | 09/22/2005  | GW         | 125-09370 | STONE 11-23   | PR          |

**General Comment:**

**Location**Overall Good: ☒

|                      |                     |       |  |
|----------------------|---------------------|-------|--|
| <b>Signs/Marker:</b> |                     |       |  |
| Type                 | OTHER               |       |  |
| Comment:             | lease sign on CR 33 |       |  |
| Corrective Action:   |                     | Date: |  |
| Type                 | WELLHEAD            |       |  |
| Comment:             |                     |       |  |
| Corrective Action:   |                     | Date: |  |

Emergency Contact Number:

Comment: 866-767-3600

Corrective Action:

Date: \_\_\_\_\_

Overall Good: ☐

|                |      |        |  |
|----------------|------|--------|--|
| <b>Spills:</b> |      |        |  |
| Type           | Area | Volume |  |

In Containment: No

Comment:

☐ Multiple Spills and Releases?

|                    |                                   |       |  |
|--------------------|-----------------------------------|-------|--|
| <b>Fencing/:</b>   |                                   |       |  |
| Type               | WELLHEAD                          |       |  |
| Comment:           | steel panels around all equipment |       |  |
| Corrective Action: |                                   | Date: |  |
| Type               | PUMP JACK                         |       |  |
| Comment:           | steel panels                      |       |  |
| Corrective Action: |                                   | Date: |  |

|                          |  |       |                 |
|--------------------------|--|-------|-----------------|
| <b>Equipment:</b>        |  |       | corrective date |
| Type: Deadman # & Marked | # 4  |       |                 |
| Comment:                 |  |       |                 |
| Corrective Action:       |  | Date: |                 |
| Type: Prime Mover        | # 1  |       |                 |
| Comment:                 | electric motor, electric panel   |       |                 |
| Corrective Action:       |  | Date: |                 |
| Type: Pump Jack          | # 1  |       |                 |
| Comment:                 | chemical container-fix leak (see attached photo), stuffing box leak, fix leak, clean up stained soils; fix gear box leak, clean up stained soils |       |                 |
| Corrective Action:       |  | Date: |                 |
| Type: Flow Line          | # 1  |       |                 |
| Comment:                 | IN USE: 3" steel risers  |       |                 |
| Corrective Action:       |  | Date: |                 |
| Type: Vertical Separator | # 1  |       |                 |

|                     |  |       |  |
|---------------------|--|-------|--|
| Comment:            | partially buried next ot GMR                       |       |  |
| Corrective Action:  |  | Date: |  |
| Type: Gas Meter Run | # 1  |       |  |
| Comment:            | steel box next to well, digital, flowlien 25.5 psi |       |  |
| Corrective Action:  |  | Date: |  |

**Venting:**

|                    |    |       |  |
|--------------------|----|-------|--|
| Yes/No             | NO |       |  |
| Comment:           |    |       |  |
| Corrective Action: |    | Date: |  |

**Flaring:**

|                    |  |       |
|--------------------|--|-------|
| Type               |  |       |
| Comment:           |  |       |
| Corrective Action: |  | Date: |

### Location Construction

Location ID: 278967 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:         | 278967                                   | Type: | WELL | API Number: | 125-09370 | Status: | PR | Insp. Status: | PR |
| Producing Well       |  |       |      |             |           |         |    |               |    |
| Comment:             | PR. Jul 2017 reported to COGCC database. |       |      |             |           |         |    |               |    |
| Corrective Action:   |  |       |      | Date:       |           |         |    |               |    |

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

Date Interim Reclamation Started: \_\_\_\_\_ Date Interim Reclamation Completed: \_\_\_\_\_

Land Use: \_\_\_\_\_

Comment: pasture**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 ☐

**Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Compaction       | Pass            | Compaction              | Pass                  |               |                          |         |
| Gravel           | Pass            | Gravel                  | 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   |
|--------------|------------------------|---|
| 688300470    | Foundation Stone 11-23 | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4274539">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4274539</a> |