

**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:

06/01/2018

Submitted Date:

06/04/2018

Document Number:

685304850**FIELD INSPECTION FORM**Loc ID 325387 Inspector Name: St John, William (Cal) On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 29200Name of Operator: FAULCONER INC* VERNON EAddress: P O BOX 7995City: TYLER State: TX Zip: 75711**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**18 Number of Comments1 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Wells, Raymond	595-302-7600	rwells@vefinc.com	SW Inspection Reports
Charles, Karen	903-581-4382	kcharles@vefinc.com	SW Inspection Reports
Sloan, Buddy	903-581-4382	rsloan@vefinc.com	SW Inspection Reports

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
214685	WELL	PR	09/24/1979	GW	067-06289	INDIAN SPRINGS 2	PR

General Comment:[Inspection completed as routine inspection requirement.](#)[This inspection does not alleviate requirement to complete any open corrective actions from previous inspections.](#)[See link at end of report for path to downloadable pictures.](#)

Location				
Lease Road:				
Type	Access			
comment:	Dirt and gravel access road.			
Corrective Action	L			Date:
Overall Good: <input type="checkbox"/>				
Signs/Marker:				
Type	TANK LABELS/PLACARDS			
Comment:	Metal sign on tank fencing. Tank capacity not posted on sign or tank.			
Corrective Action:				Date:
Type	WELLHEAD			
Comment:	Metal sign mounted on gas meter shed.			
Corrective Action:				Date:
Emergency Contact Number:				
Comment:	Operator contact information posted on wellhead sign.			
Corrective Action:				Date: _____
Good Housekeeping:				
Type	DEBRIS			
Comment:	Chemical drum (empty) at wellhead is off spil pevention and setting on ground. Drum is rusted through with a visible hole. Line is currently disconnected from wellhead and not in use.			
Corrective Action:	Remove unused equipment and debris to comply with Rule 603.f.			Date: 07/05/2018
Overall Good: <input type="checkbox"/>				
Spills:				
Type	Area	Volume		
In Containment: No _____				
Comment: _____				
<input type="checkbox"/> Multiple Spills and Releases?				
Fencing/:				
Type	WELLHEAD			
Comment:	Steel post and pole barrier.			
Corrective Action:				Date:
Type	TANK BATTERY			
Comment:	Steel post and pole with hog wire fencing.			
Corrective Action:				Date:
Equipment:				
Type: Deadman # & Marked			# 4	corrective date
Comment:			Anchor marker in NW corner is down.	
Corrective Action:			Date:	
Type: Gas Meter Run			# 2	

Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 2		
Comment:			
Corrective Action:		Date:	
Type: Flow Line	# 4		
Comment:	In use - 2" steel line from wellhead tubing (MV) to separator inlet. All points co-located. In use - 2" steel line from wellhead tubing (PC) to separator inlet. All points co-located. In use - 2" steel line from separator outlet to gas meter inlet. All points co-located. In use - 2" steel line from separator outlet to gas meter inlet. All points co-located.		
Corrective Action:		Date:	
Type: Plunger Lift	# 1		
Comment:			
Corrective Action:		Date:	
Type: Ancillary equipment	# 1		
Comment:	Wellhead		
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 2		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	2	OTHER	Open Top		,
Comment:	Open top tank with expanded metal cover.				
Corrective Action:				Date:	

Paint

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

Berms

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

Venting:

Yes/No	NO	
Comment:		
Corrective Action:		Date:

Flaring:

Type	
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Comment:			
Corrective Action:		Date:	

Inspected Facilities				
Facility ID: 214685	Type: WELL	API Number: 067-06289	Status: PR	Insp. Status: PR
Producing Well				
Comment:	PR.			
Corrective Action:			Date:	

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

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

Land Use: _____

Comment: [Revegetation of interim reclamation area is progressing with mixed vegetation.](#)**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 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
Compaction	Pass	Gravel	Pass			
Berms	Pass	Compaction	Pass			
Gravel	Pass					
Ditches	Pass					

Comment: [Stormwater BMPs appear to be functioning at time of inspection.](#)

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
401661401	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4482827
685304864	Inspection photos.	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4482825