

**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:

08/02/2018

Submitted Date:

08/06/2018

Document Number:

691200327**FIELD INSPECTION FORM**

Loc ID 323740 Inspector Name: Evins, Bret 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:**10 Number of Comments3 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
		regulatory@foundationenergy.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
245657	WELL	SI	11/01/2015	OW	123-13452	SOONER UNIT 13-16	SI

General Comment:

Location				
Lease Road:				
Type	Access			
comment:				
Corrective Action	L			Date:
Overall Good: <input checked="" type="checkbox"/>				
Signs/Marker:				
Type	WELLHEAD			
Comment:	New sign has been posted. This satisfies the CA requirements dated 9/14/2016. Refer to FIR #684903883.			
Corrective Action:				Date:
Emergency Contact Number:				
Comment:				
Corrective Action:				Date: _____
Good Housekeeping:				
Type	UNUSED EQUIPMENT			
Comment:	See Interim Reclamation page, sec. 1003a of this FIR.			
Corrective Action:	Comply with Rule 603.f .			Date: 09/05/2018
Overall Good: <input type="checkbox"/>				
Spills:				
Type	Area	Volume		
In Containment: No				
Comment:				
<input type="checkbox"/> Multiple Spills and Releases?				
Fencing/:				
Type	WELLHEAD			
Comment:	Barbed wire. Fence appears to be in adequate condition. This satisfies the CA requirements dated 08/07/2017. Refer to FIR #684903883.			
Corrective Action:				Date:
Equipment:				
Type: Pump Jack	# 1			corrective date
Comment:				
Corrective Action:				Date:
Type: Prime Mover	# 1			
Comment:	Electric motor drives pumpjack.			
Corrective Action:				Date:
Type: Deadman # & Marked	# 4			
Comment:				
Corrective Action:				Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS	
			CENTRALIZED BATTERY		40.652222,-103.869725	
Comment: Refer to Loc #327361.						
Corrective Action:					Date:	

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Comment:					
Corrective Action:					Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected FacilitiesFacility ID: 245657 Type: WELL API Number: 123-13452 Status: SI Insp. Status: SI**Idle Well**Purpose: ☒ Shut In ☐ Temporarily AbandonedReminder: PRODUCTION RECORDSComment: SI. Last produced Oct 2015.Corrective Action: Date: **BradenHead**Comment: Bradenhead is NOT plumbed to surface. Mechanical Conditions. Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 605.d.Corrective Action: Comply with Rule 605.d.Date: 09/05/2018

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? Fail

Comment _____

Unused and/or waste equipment on wellsite location. Statewide unused equipment, weeds, waste, and trash requirements.

Corrective Action _____

Comply with Rule 603.f .

Date **09/05/2018**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
Gravel	Pass	Gravel	Pass			

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

Comment	User	Date
Did not check facility battery at time of this inspection.	evinsb	08/06/2018

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

Document Num	Description	URL
401726043	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4545071
691200329	Site photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4545069