

**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:

08/20/2018

Submitted Date:

08/20/2018

Document Number:

692600099**FIELD INSPECTION FORM**

Loc ID 303293 Inspector Name: Welsh, Brian On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 72118Name of Operator: PRIME OPERATING COMPANYAddress: 9821 KATY FREEWAY STE 1050City: HOUSTON State: TX Zip: 77042**Status Summary:**

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

Findings:6 Number of Comments1 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Byrne, Marla	713-735-0000/78110	mbyrne@primeenergy.com	Inspections
Beard, Alyssa		regulatory@foundationenergy.com	
Trujillo, Aaron		aaron.trujillo@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
252830	WELL	PR	05/20/1982	GW	125-06706	WEYERMAN 6-18	PA

General Comment:[Final Routine Inspection](#)

LocationOverall Good: ☐

Emergency Contact Number:

Comment: Corrective Action: Date: Overall Good: ☐**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Equipment:**

corrective date

Type: Vertical Separator # 0

Comment: [Removed from location](#)Corrective Action: Date:

Type: Gas Meter Run # 0

Comment: [Removed from location](#)Corrective Action: Date: **Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	0	200 BBLS	PBV FIBERGLASS		39.626240,-102.224270	
Comment: Removed from location						
Corrective Action: <input type="text"/>						Date: <input type="text"/>

PaintCondition: Other (Content): Other (Capacity): Other (Type): **Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Comment: <input type="text"/>					
Corrective Action: <input type="text"/>					Date: <input type="text"/>

Venting:

Yes/No

Comment: Corrective Action: Date: **Flaring:**

Type		
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Comment:			
Corrective Action:		Date:	

Inspected Facilities									
Facility ID:	252830	Type:	WELL	API Number:	125-06706	Status:	PR	Insp. Status:	PA

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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 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 Pass Pit mouse/rat holes, cellars backfilled Pass

Debris removed Pass No disturbance /Location never built In

Access Roads Regraded In Contoured In Culverts removed _____

Gravel removed In

Location and associated production facilities reclaimed In Locations, facilities, roads, recontoured In

Compaction alleviation In Dust and erosion control _____

Non cropland: Revegetated 80% In Cropland: perennial forage _____

Weeds present In Process Subsidence _____

1004.d. FINAL VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

Comment: Well has been plugged. Equipment has been removed from location. Final reclamation will be verified by reclamation specialist

Corrective Action: Continue with final reclamation process Date _____

Overall Final Reclamation In Process 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**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
692600103	Location photo	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4556844