

Inspector Name: Peterson, Tom

**FORM  
INSP**Rev  
05/11**State of Colorado****Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Inspection Date:

06/19/2013

Document Number:

671100111

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	<u>430381</u>	<u>430370</u>	<u>Peterson, Tom</u>	<input type="checkbox"/> 2A Doc Num: _____

**Operator Information:**OGCC Operator Number: 69175 Name of Operator: PDC ENERGY INCAddress: 1775 SHERMAN STREET - STE 3000City: DENVER State: CO Zip: 80203**Contact Information:**

Contact Name	Phone	Email	Comment
CHESSON, BOB		robert.chesson@state.co.us	
Green, Dan		daniel.green@pdce.com	
Bruns, Brandon		brandon.bruns@pdce.com	
Heneghan, Adell		adell.heneghan@pdce.com	

**Compliance Summary:**QtrQtr: SENW Sec: 5 Twp: 6N Range: 67W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
02/27/2013	666900021			S			N
02/26/2013	666900020	DG	AO	S			N
02/14/2013	663902093	DG	DG	S			N
02/12/2013	663902091	DG	WK	U			N
02/12/2013	663700090	DG	DG	U			N
02/11/2013	663902089	DG	WK	U			N

**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
430366	WELL	XX	10/06/2012	LO	123-36145	Ochsner 5K-221	<input type="checkbox"/>
430367	WELL	XX	10/06/2012	LO	123-36146	Ochsner 5K-401	<input type="checkbox"/>
430381	WELL	PR	02/01/2013	OW	123-36153	Ochsner 5O-441	<input checked="" type="checkbox"/>
432215	PIT	CL	03/26/2013		-	Ochsner 5O-441	<input type="checkbox"/>

**Equipment:****Location Inventory**

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Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>3</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>3</u>	Separators: <u>3</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: <u>1</u>	Oil Tanks: <u>12</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

### Location

#### Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
CONTAINERS	Satisfactory	Methanol systems		
BATTERY	Satisfactory			
WELLHEAD	Satisfactory			
TANK LABELS/PLACARDS	Unsatisfactory	Incomplete placarding on production tanks	Install sign to comply with rule 210.d., 210.e	07/24/2013

Emergency Contact Number: (S/U/V) Satisfactory \_\_\_\_\_

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

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

#### Spills:

Type	Area	Volume	Corrective action	CA Date
Crude Oil	Truck Loadout	<= 5 bbls	Remove or remediate oily soil beneath west end of loadline. Repair all leaks	07/24/2013

☐ Multiple Spills and Releases?

#### Fencing/:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK BATTERY	Satisfactory	Wire		
WELLHEAD	Satisfactory	Panel		

#### Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Flow Line	1	Satisfactory			
Bird Protectors	2	Satisfactory			
Emission Control Device	1	Satisfactory			
Ancillary equipment	2	Satisfactory	Methanol systems		
Horizontal Heated Separator	1	Satisfactory	N40.51611W 104.91768		
Plunger Lift	1	Satisfactory			
Ancillary equipment	1	Satisfactory	VRU		
Gas Meter Run	1	Satisfactory			

<b>Facilities:</b>		<input checked="" type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	1	400 BBLS	FIBERGLASS AST	,	
S/U/V:	Satisfactory	Comment: N40.51606W104.91822			
Corrective Action:				Corrective Date:	

Paint

Condition	Adequate
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Other (Content) \_\_\_\_\_

Other (Capacity) \_\_\_\_\_

Other (Type) \_\_\_\_\_

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action				Corrective Date	
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Comment					
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<b>Facilities:</b>	<input checked="" type="checkbox"/> New Tank	Tank ID: _____
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Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	100 BBLS	PBV FIBERGLASS	,

S/U/V:	Satisfactory	Comment: N40.51606W104.91822		
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Corrective Action:				Corrective Date:	
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Paint

Condition	Adequate
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Other (Content) \_\_\_\_\_

Other (Capacity) \_\_\_\_\_

Other (Type) \_\_\_\_\_

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action				Corrective Date	
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Comment					
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<b>Facilities:</b>		<input checked="" type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	3	400 BBLS	STEEL AST	,	
S/U/V:	Satisfactory		Comment: N40.51606 W104.91822		
Corrective Action:				Corrective Date:	
<b>Paint</b>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<b>Berms</b>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment					
<b>Venting:</b>					
Yes/No		Comment			
NO					
<b>Flaring:</b>					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

**Predrill**

Location ID: 430370

**Site Preparation:**

Lease Road Adeq.: \_\_\_\_\_

Pads: \_\_\_\_\_

Soil Stockpile: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:****Comment:** \_\_\_\_\_**CA:** \_\_\_\_\_**Date:** \_\_\_\_\_**Wildlife BMPs:**

BMP Type	Comment
Storm Water/Erosion Control	This Stormwater Management Plan contains required elements associated with PDC's construction activities for Area 3, as defined in the CDPS General Permit for Stormwater Discharges Associated with Construction Activity, Authorization to Discharge Under the Colorado Discharge Permit System (Permit No. COR-030000, re-issued and effective July 1, 2007).BMPs for sediment and erosion control will be accomplished through a combination of construction techniques, vegetation and re-vegetation, administrative controls, and structural features.

**Comment:** \_\_\_\_\_**CA:** \_\_\_\_\_**Date:** \_\_\_\_\_**Stormwater:**

Erosion BMPs	Present	Other BMPs	Present

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: Erosion BMPs: \_\_\_\_\_

Other BMPs: \_\_\_\_\_

**Comment:** \_\_\_\_\_**Staking:****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:**Facility**

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Facility ID: 430381 Type: WELL API Number: 123-36153 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

**Environmental**

**Spills/Releases:**

Type of Spill: \_\_\_\_\_ Description: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_  
Comment: \_\_\_\_\_  
Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_  
Reportable: \_\_\_\_\_ GPS: Lat \_\_\_\_\_ Long \_\_\_\_\_  
Proximity to Surface Water: \_\_\_\_\_ Depth to Ground Water: \_\_\_\_\_

**Water Well:**

Lat \_\_\_\_\_ Long \_\_\_\_\_  
DWR Receipt Num: \_\_\_\_\_ Owner Name: \_\_\_\_\_ GPS : \_\_\_\_\_

**Field Parameters:**

Sample Location: \_\_\_\_\_

Emission Control Burner (ECB): \_\_\_\_\_

Comment: \_\_\_\_\_

Pilot: \_\_\_\_\_ Wildlife Protection Devices (fired vessels): \_\_\_\_\_

**Reclamation - Storm Water - Pit**

**Interim Reclamation:**

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

Land Use: IRRIGATED

Comment: \_\_\_\_\_

1003a. Debris removed? Pass CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Waste Material Onsite? Pass CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Unused or unneeded equipment onsite? Pass CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Pit, cellars, rat holes and other bores closed? Pass CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Guy line anchors removed? Pass CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Guy line anchors marked? \_\_\_\_\_ CM \_\_\_\_\_  
CA \_\_\_\_\_ CA Date \_\_\_\_\_

1003b. Area no longer in use? Pass Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? \_\_\_\_\_

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1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

Cuttings management: \_\_\_\_\_

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? In

Production areas have been stabilized? Pass

Segregated soils have been replaced? Pass

**RESTORATION AND REVEGETATION**

Cropland

Top soil replaced Pass

Recontoured Pass

Perennial forage re-established In

Non-Cropland

Top soil replaced \_\_\_\_\_

Recontoured \_\_\_\_\_

80% Revegetation \_\_\_\_\_

1003 f. Weeds Noxious weeds? P

Comment: \_\_\_\_\_

Overall Interim Reclamation Pass

**Final Reclamation/ Abandoned Location:**

Date Final Reclamation Started: \_\_\_\_\_

Date Final Reclamation Completed: \_\_\_\_\_

Final Land Use: IRRIGATED

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 \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

Date \_\_\_\_\_

Overall Final Reclamation \_\_\_\_\_

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	SI	Pass	

S/U/V: Satisfactory Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

Permit:	Facility ID	Permit Num	Expiration Date
	432215	400380955	
	432215	400380955	