

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



DE	ET	OE	ES
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Inspection Date:
09/02/2013

Document Number:
668401658

Overall Inspection:
Unsatisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>260552</u>	<u>316292</u>	<u>BROWNING, CHUCK</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number: 10112 Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC
 Address: 16000 DALLAS PARKWAY #875
 City: DALLAS State: TX Zip: 75248-

Contact Information:

Contact Name	Phone	Email	Comment
Contact, General		regulatory@foundationenergy.com	
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector
Bishop, Tanner	970-675-2034	tbishop@foundationenergy.com	

Compliance Summary:

QtrQtr: NESE Sec: 14 Twp: 4S Range: 104W

Inspector Comment:

2-Wellhead w/ rotary pump & generator. 2-Separator, 2-Meter, Telemetry. 1-40 BBL fiberglass tank burried to ground level. Old tank berms unreclaimed. Junk pipe and debris around location.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
260552	WELL	PR	08/01/2012	GW	103-10159	COLUMBINE SP FED 8-14-4-104	<input checked="" type="checkbox"/>
263871	WELL	PA	10/11/2011	GW	103-10240	COLUMBINE SP FED 8C-14-4-104	<input checked="" type="checkbox"/>
270724	PIT	AC	01/06/2004		-	COLUMBINE SPGS 8C-14	<input type="checkbox"/>

Equipment:

Location Inventory

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

Location

Lease Road:

Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Main	Satisfactory			
Access	Satisfactory			

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	Unsatisfactory		Clean up location	10/31/2013

Spills:				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Gas Meter Run	2	Satisfactory			
Deadman # & Marked		Unsatisfactory		Mark guy line anchors per rule 1003.a.	10/31/2013
Horizontal Heated Separator	2	Satisfactory			

Venting:	
Yes/No	Comment
NO	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 316292

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Comment: _____

CA: _____ **Date:** _____

Wildlife BMPs:

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

Facility ID: 260552 Type: WELL API Number: 103-10159 Status: PR Insp. Status: PR

Producing Well

Comment: 2-Wellhead w/ rotary pump & generator. 2-Separator, 2-Meter, Telemetry. 1-40 BBL fiberglass tank buried to ground level. Old tank berms unreclaimed. Junk pipe and debris around location.

Facility ID: 263871 Type: WELL API Number: 103-10240 Status: PA Insp. Status: PA

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: _____
Comment: _____

- 1003a. Debris removed? Fail CM _____
CA clean up location CA Date 10/31/2013
- Waste Material Onsite? Fail CM _____
CA clean up location CA Date 10/31/2013
- Unused or unneeded equipment onsite? Fail CM _____
CA clean up location CA Date 10/31/2013
- Pit, cellars, rat holes and other bores closed? Pass CM _____
CA _____ CA Date _____
- Guy line anchors removed? _____ CM _____
CA _____ CA Date _____
- Guy line anchors marked? Fail CM _____
CA Mark guy line anchors per rule 1003.a CA Date 10/31/2013

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

1003 f. Weeds Noxious weeds? _____ F _____

Comment: Area has not been restored, contoured, amended, seeded or footprint reduced. Begin interim reclamation w/1000 series rules and continue treatment for noxious weeds.

Overall Interim Reclamation In Process

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 _____

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
				MHSP	Pass	

S/U/V: **Unsatisfactory**

Corrective Date: **10/31/2013**

Comment: Erosion at entrance to location

CA: Stormwater BMPs 1002.f.(2)

Permit:	Facility ID	Permit Num	Expiration Date
	270724	1126460	
	270724	1126460	