

**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:

11/16/2016

Submitted Date:

11/17/2016

Document Number:

675103086**FIELD INSPECTION FORM**

Loc ID 315432	Inspector Name: GRANAHAH, KYLE	On-Site Inspection <input type="checkbox"/>	Status Summary: <input type="checkbox"/> THIS IS A FOLLOW UP INSPECTION <input type="checkbox"/> FOLLOW UP INSPECTION REQUIRED <input checked="" type="checkbox"/> NO FOLLOW UP INSPECTION REQUIRED							
2A Doc Num: _____			Findings: 4 Number of Comments 0 Number of Corrective Actions <input type="checkbox"/> Corrective Action Response Requested							
Operator Information: OGCC Operator Number: <u>51130</u> Name of Operator: <u>LOCIN OIL CORPORATION</u> Address: <u>25231 GROGAN'S MILL RD STE 500</u> City: <u>THE WOODLANDS</u> State: <u>TX</u> Zip: <u>77380</u>										
Contact Information:										
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Contact Name</th> <th>Phone</th> <th>Email</th> <th>Comment</th> </tr> </thead> <tbody> <tr> <td>Clavenna, Mark</td> <td>281-362-8600 X22</td> <td>mclavenna@nclnr.com</td> <td>all inspections</td> </tr> </tbody> </table>				Contact Name	Phone	Email	Comment	Clavenna, Mark	281-362-8600 X22	mclavenna@nclnr.com
Contact Name	Phone	Email	Comment							
Clavenna, Mark	281-362-8600 X22	mclavenna@nclnr.com	all inspections							

Inspected Facilities:							
Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
230819	WELL	PR	01/05/1981	GW	103-08488	FORK UNIT-FEDERAL 2-29-1-1	PR

General Comment:

LocationOverall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 970-574-7607 or 7609

Corrective Action:

Date: _____

Overall Good: ☒

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	TANK BATTERY		
Comment:			
Corrective Action:		Date:	

Equipment:			corrective date
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	
Type: Plunger Lift	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 1		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		

Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tanak ID	SE GPS	
PRODUCED WATER	1	<50 BBLS	FIBERGLASS AST		39.937250,-108.755260	
Comment:						
Corrective Action:						Date:

Paint

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

Berms

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

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities				
Facility ID: 230819	Type: WELL	API Number: 103-08488	Status: PR	Insp. Status: PR
Producing Well				
Comment:	Pr - no leaks/venting			
Corrective Action:				Date:

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

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

Land Use: _____

Comment: _____

1002 SITE PREPARATION AND STABILIZATION

1002a. FENCING _____ Pass _____

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 _____ Pass _____

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
				Material Handling And Spill Prevention	Pass	
Compaction	Pass					

Comment:

No sediment flow evident

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT