

**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

Inspection Date:

04/29/2016

Document Number:

678800048

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	202799	320139	LEONARD, MIKE	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 87195Name of Operator: TEXAS TEA OF COLORADO LLC DBA TEXAS TEA LLCAddress: 14405 W. COLFAX #298City: LAKEWOOD State: CO Zip: 80401

- ☒ THIS IS A FOLLOW UP INSPECTION
- ☒ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED
- ☒ INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

Contact Name	Phone	Email	Comment
Beckstrom, David		david.beckstrom@state.co.us	
Parker, Bob	720-775-7209	rpmindy@msn.com	owner

Compliance Summary:QtrQtr: SWSW Sec: 14 Twp: 1S Range: 67W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
09/17/2012	665400403	TA	TA	ALLEGED VIOLATION	F		Yes
07/24/1997	500132760	PR	PR			Fail	Yes

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
202799	WELL	TA	02/01/2007	SI	001-08204	ADAMS COUNTY 1	TA	<input checked="" 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/Action Required	comment	Corrective Action	Date
Main	ACTION REQUIRED	Inspection Document #665400403 dated 09/17/2012 indicates road needing repair. Erosion still evident at lease entrance from Adams County yard (see attached photos). Also access road from north is still in place	Repair erosion and close and renmediate road from north	09/24/2012

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	ACTION REQUIRED	Inspection Document #665400403 dated 09/17/2012 indicates sign needs installed. Current inspection observed no sign on location	Install sign to comply with rule 210.	09/24/2012

Emergency Contact Number (S/AR): ACTION Corrective Date: 09/24/2016Comment: **Inspection Document #665400403 dated 09/17/2012 indicates no emergency contact #. Current inspection observed no emergency # posted**Corrective Action: **Post Emergency Contact Number**

Good Housekeeping:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT		Electric transformers and meter connection on north side of wellsite-not being used. Meter has been pulled (see attached photos). This reflects same condition as found in inspection in 2012	Comply with Rule 603.f using the Rule 603.f guidance document for further details.	09/24/2012

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

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Equipment:			
Type: Horizontal Heated Separator	# 0	Satisfactory/Action Required:	
Comment	No separation equipment on location		

Corrective Action		Date:	
Type: Ancillary equipment	# 2	Satisfactory/Action Required:	ACTION REQUIRED
Comment	Electrical equipment north of wellhead See attached Photos		
Corrective Action	Comply with Rule 603.f using the Rule 603.f guidance document for further details.		Date: 9/24/2012
Type: Flow Line	# 4	Satisfactory/Action Required:	
Comment	risers at tank battery location still in place see attached photos		
Corrective Action			Date:
Type: Flow Line	# 1	Satisfactory/Action Required:	ACTION REQUIRED
Comment	Inspection Document #665400403 dated 09/17/2012 indicates flowline on surface and requires testing or removal per 1100 series rules		
Corrective Action	Contact the Engineering Integrity department to discuss flowline testing requirements per Rule 1102. Refer to the 1101 and 1102 guidance document for further details		Date: 9/24/2012
Type: Deadman # & Marked	# 1	Satisfactory/Action Required:	ACTION REQUIRED
Comment	Current inspection found one anchor (see attached photo. Inspection from 2012 indicates at least one other anchor may be present. No anchor markings are present		
Corrective Action	Mark guy line anchors per Rule 604.c.(2)Q.		Date: 9/24/2012

Facilities:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER				

S/AR	Comment: no stoarge equipment on location
Corrective Action:	Corrective Date:

Paint

Condition	
-----------	--

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action	Corrective Date
Comment	

Facilities:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CRUDE OIL				

S/AR	Comment: No storage equipment on location
Corrective Action:	Corrective Date:

Paint

Condition	
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Other (Content) _____

Other (Capacity) _____

Inspector Name: LEONARD, MIKE

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
Comment			

Venting:

Yes/No	
Comment	

Flaring:

Type		Satisfactory/Action Required	
Comment:			
Corrective Action:		Correct Action Date:	

Predrill

Location ID: 202799

Site Preparation:

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

S/AR: _____

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

Form 2A COAs:

S/AR: _____ Comment: _____

CA: _____ Date: _____

Wildlife BMPs:

S/AR: _____ Comment: _____

CA: _____ Date: _____

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: 202799 Type: WELL API Number: 001-08204 Status: TA Insp. Status: TA

Idle WellPurpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: _____

S/A/V: ACTION CA Date: 09/24/2012

CA: Contact COGCC Area Engineer.

Comment: Well has not produced liquids since February 2007. Well is not capable of production in present state.

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Inspector Name: LEONARD, MIKE

Corrective Action: _____ Date: _____
Reportable: _____ GPS: Lat _____ Long _____
Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

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. Waste and Debris removed? _____

CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? _____

CM _____

CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? _____

CM _____

CA _____ CA Date _____

Guy line anchors marked? _____

CM _____

CA _____ CA 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 REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Inspector Name: LEONARD, MIKE

Top soil replaced _____

Recontoured _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

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 _____

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

S/A/V: _____ Corrective Date: _____

Comment: _____

CA: _____

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
678800050	Adams County 1 Inspection 4_28_2016	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3845093