

**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:

06/17/2016

Document Number:

674702837

Overall Inspection:

SATISFACTORY w/ CMT
or AR

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>335844</u>	<u>335844</u>	<u>LONGWORTH, MIKE</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>10433</u>
Name of Operator:	<u>LARAMIE ENERGY LLC</u>
Address:	<u>1401 SEVENTEENTH STREET #1400</u>
City:	<u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>

- 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
Bankert, Wayne	(970) 683-5419	wbankert@laramie-energy.com	Senior Regulatory & Environmental Coordinator

Compliance Summary:

QtrQtr:	<u>NENE</u>	Sec:	<u>16</u>	Twp:	<u>6S</u>	Range:	<u>97W</u>
---------	-------------	------	-----------	------	-----------	--------	------------

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
09/04/2013	663902125			SATISFACTORY	F		No
09/04/2013	663902124			SATISFACTORY			No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
288287	WELL	PR	04/11/2012	GW	045-13180	CASCADE CREEK 697-16-32	PR	<input checked="" type="checkbox"/>
290124	WELL	PR	02/29/2008	GW	045-13997	CASCADE CREEK 697-15-01A	PR	<input checked="" type="checkbox"/>
290125	WELL	AL	12/10/2009	LO	045-13996	CASCADE CREEK 697-16-15DB	AL	<input type="checkbox"/>
290126	WELL	AL	12/04/2012	LO	045-13995	CASCADE CREEK 697-16-15DC	AL	<input type="checkbox"/>
290127	WELL	AL	12/04/2012	LO	045-13994	CASCADE CREEK 697-16-23DA	AL	<input type="checkbox"/>
290128	WELL	AL	12/04/2012	LO	045-13993	CASCADE CREEK 697-16-23BD	AL	<input type="checkbox"/>
290129	WELL	PR	07/11/2012	GW	045-13992	CASCADE CREEK 697-16-31	PR	<input checked="" type="checkbox"/>
290130	WELL	PR	09/17/2009	GW	045-13991	CASCADE CREEK 697-16-07	PR	<input checked="" type="checkbox"/>
290131	WELL	PR	04/20/2012	GW	045-13990	CASCADE CREEK 697-16-15A	PR	<input checked="" type="checkbox"/>

290132	WELL	AL	12/04/2012	LO	045-13989	CASCADE CREEK 697-15-17DA	AL	<input type="checkbox"/>
290133	WELL	PR	09/17/2009	GW	045-13988	CASCADE CREEK 697-15-17B	PR	<input checked="" type="checkbox"/>
290134	WELL	PR	04/21/2015	GW	045-13987	CASCADE CREEK 697-15-25	PR	<input checked="" type="checkbox"/>
290135	WELL	PR	11/24/2008	GW	045-13986	CASCADE CREEK 697-16-06	PR	<input checked="" type="checkbox"/>
290136	WELL	PR	11/12/2012	GW	045-13985	CASCADE CREEK 697-15-09A	PR	<input checked="" type="checkbox"/>
290137	WELL	AL	12/04/2012	LO	045-13984	CASCADE CREEK 697-15-09DB	AL	<input type="checkbox"/>
290138	WELL	PR	01/01/2008	GW	045-13983	CASCADE CREEK 697-09-64	PR	<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

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	No sign in frame at entrance of location		
BATTERY	ACTION REQUIRED	No sign in frame at entrance of location.	Install sign to comply with rule 210.	07/01/2016
TANK LABELS/PLACARDS	SATISFACTORY			
CONTAINERS	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: **970-248-0497**

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
DEBRIS	ACTION REQUIRED	Verity of debri on location. Plastic tread protectors, liner debri around tank battery.	Comply with Rule 603.f using the Rule 603.f guidance document for further details	06/30/2016

Spills:				
Type	Area	Volume	Corrective action	CA Date
	WELLHEAD	<= 1 bbl	Stained ground around CC 697-15-25. Control and contain spills/releases and clean up per Rule 906.a. Contact COGCC EPS staff	07/20/2016

Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	ACTION REQUIRED	Fence is down on south end.	Repair fence around wells.	07/17/2016

Equipment:				
Type: Plunger Lift	# 10	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Horizontal Heated Separator	# 10	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Bird Protectors	# 4	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Ancillary equipment	# 3	Satisfactory/Action Required:	SATISFACTORY	
Comment	Chemical containers at wells.			
Corrective Action				Date:

Facilities:				
<input type="checkbox"/> New Tank	Tank ID: _____			
Contents	#	Capacity	Type	SE GPS
METHANOL	1	<50 BBLS	STEEL AST	,
S/AR	SATISFACTORY	Comment:		
Corrective Action:				Corrective Date:

Paint	
Condition	Adequate
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
Comment				

Facilities:				
<input type="checkbox"/> New Tank	Tank ID: _____			
Contents	#	Capacity	Type	SE GPS

CONDENSATE	2	400 BBLs	HEATED STEEL AST	,	
------------	---	----------	------------------	---	--

S/AR	SATISFACTORY	Comment:	Air id 045-1705-001		
------	--------------	----------	---------------------	--	--

Corrective Action:		Corrective Date:	
--------------------	--	------------------	--

Paint

Condition	Adequate
-----------	----------

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	
-------------------	--	-----------------	--

Comment	
---------	--

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	400 BBLs	STEEL AST	,

S/AR	SATISFACTORY	Comment:	Air id 045-1705-001		
------	--------------	----------	---------------------	--	--

Corrective Action:		Corrective Date:	
--------------------	--	------------------	--

Paint

Condition	Adequate
-----------	----------

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	
-------------------	--	-----------------	--

Comment	
---------	--

Venting:

Yes/No	NO
--------	----

Comment	
---------	--

Flaring:

Type	Satisfactory/Action Required
------	------------------------------

Comment:	
----------	--

Corrective Action:		Correct Action Date:	
--------------------	--	----------------------	--

Predrill

Location ID: 335844

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: 288287 Type: WELL API Number: 045-13180 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 290124 Type: WELL API Number: 045-13997 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 290129 Type: WELL API Number: 045-13992 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 290130 Type: WELL API Number: 045-13991 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 290131 Type: WELL API Number: 045-13990 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 290133 Type: WELL API Number: 045-13988 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 290134 Type: WELL API Number: 045-13987 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 290135 Type: WELL API Number: 045-13986 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 290136 Type: WELL API Number: 045-13985 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 290138 Type: WELL API Number: 045-13983 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

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:

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: Location is excessive sized.

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

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 _____

Inspector Name: LONGWORTH, MIKE

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
				MHSP	Fail	Chemical in secondary containment.
Berms	Pass					
		Ditches	Pass			
Gravel	Pass					
		Culverts	Pass			
Ditches	Pass					
Compaction	Pass					

S/A/V: **ACTION REQUIRED**

Corrective Date: **06/28/2016**

Comment: **Spilled chemical in secondary containment of chemical container next to well CC 697-15-25.**

CA: **Remove fluid from spill pan.**

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
674702837	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3882310
674702838	missing sign, debris, stains	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3882222