

**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:

07/29/2016

Document Number:

674702980

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335915	335915	LONGWORTH, MIKE	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 96850Name of Operator: TEP ROCKY MOUNTAIN LLCAddress: PO BOX 370City: PARACHUTE State: CO Zip: 81635

- ☐ 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
Inspection, Terra TEP	970-263-2716	COGCCInspectionReports@terraep.com	TEP Inspection Mail Box

Compliance Summary:QtrQtr: NENE Sec: 32 Twp: 5S Range: 97W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
03/27/2015	674701166			SATISFACTORY			No
08/16/2013	663901498			SATISFACTORY			No
08/16/2013	663901497			SATISFACTORY	I		No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
277263	WELL	PR	01/01/2006	GW	045-10654	CHEVRON TR 41-32-597	PR	<input checked="" type="checkbox"/>
296959	WELL	PR	01/07/2009	GW	045-16236	CHEVRON TR331-32-597	PR	<input checked="" type="checkbox"/>
296960	WELL	PR	07/08/2008	GW	045-16237	CHEVRON TR511-33-597	PR	<input checked="" type="checkbox"/>
296961	WELL	PR	12/29/2008	GW	045-16238	CHEVRON TR 411-33-597	PR	<input checked="" type="checkbox"/>
296962	WELL	PR	04/01/2012	GW	045-16239	CHEVRON TR 11-33-597	PR	<input checked="" type="checkbox"/>
296965	WELL	PR	07/08/2008	GW	045-16240	CHEVRON TR 311-33-597	PR	<input checked="" type="checkbox"/>
417327	WELL	AL	08/20/2013	LO	045-19476	Chevron TR 12-33-597	AL	<input type="checkbox"/>
417328	WELL	AL	08/20/2013	LO	045-19477	Chevron TR 342-32-597	AL	<input type="checkbox"/>
417332	WELL	AL	08/20/2013	LO	045-19480	Chevron TR 541-32-597	AL	<input type="checkbox"/>

Inspector Name: LONGWORTH, MIKE

417333	WELL	AL	08/20/2013	LO	045-19481	Chevron TR 432-32-597	AL	<input type="checkbox"/>
417334	WELL	PR	04/01/2012	OW	045-19482	Chevron TR 332-32-597	PR	<input checked="" type="checkbox"/>
417335	WELL	AL	08/20/2013	LO	045-19483	Chevron TR 531-32-597	AL	<input type="checkbox"/>
417336	WELL	AL	08/20/2013	LO	045-19484	Chevron TR 431-32-597	AL	<input type="checkbox"/>
417339	WELL	AL	08/20/2013	LO	045-19487	Chevron TR 441-32-597	AL	<input type="checkbox"/>
417340	WELL	PR	09/01/2012	GW	045-19488	Chevron TR 412-33-597	PR	<input checked="" type="checkbox"/>
417341	WELL	AL	08/20/2013	LO	045-19489	Chevron TR 442-32-597	AL	<input type="checkbox"/>
417342	WELL	PR	09/01/2012	GW	045-19490	Chevron TR 42-32-597	PR	<input checked="" type="checkbox"/>
417343	WELL	AL	08/20/2013	LO	045-19491	Chevron TR 312-33-597	AL	<input type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: <u>3</u>	Wells: <u>18</u>	Production Pits: <u>1</u>
Condensate Tanks: <u>2</u>	Water Tanks: <u>6</u>	Separators: <u>5</u>	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: <u>2</u>
Gas Compressors: _____	VOC Combustor: <u>1</u>	Oil Tanks: <u>2</u>	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			
BATTERY	SATISFACTORY			
CONTAINERS	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: 970-285-9377

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Spills:

Inspector Name: LONGWORTH, MIKE

Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				
Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
SEPARATOR	SATISFACTORY			
TANK BATTERY	SATISFACTORY			
Equipment:				
Type: Bird Protectors	# 9	Satisfactory/Action Required: SATISFACTORY		
Comment				
Corrective Action				Date:
Type: Horizontal Heated Separator	# 10	Satisfactory/Action Required:		
Comment				
Corrective Action				Date:
Type: Ancillary equipment	# 2	Satisfactory/Action Required: SATISFACTORY		
Comment	Chemical containers			
Corrective Action				Date:
Type: Plunger Lift	# 9	Satisfactory/Action Required: SATISFACTORY		
Comment				
Corrective Action				Date:

Facilities:				
<input type="checkbox"/> New Tank		Tank ID: _____		
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	400 BBLS	HEATED STEEL AST	,
S/AR	SATISFACTORY		Comment: Air id 045-1570-003	
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:				
<input type="checkbox"/> New Tank		Tank ID: _____		
Contents	#	Capacity	Type	SE GPS
CONDENSATE	1	400 BBLS	HEATED STEEL AST	,

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S/AR	SATISFACTORY	Comment: Air id 045-1570-002		
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficent	Base Sufficient	Adequate
Corrective Action				Corrective Date
Comment				
Facilities: <input type="checkbox"/> New Tank Tank ID: _____				
Contents	#	Capacity	Type	SE GPS
CONDENSATE	1	OTHER	HEATED STEEL AST	,
S/AR	SATISFACTORY	Comment: Air id 045-1570-003		
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficent	Base Sufficient	Adequate
Corrective Action				Corrective Date
Comment				
Facilities: <input type="checkbox"/> New Tank Tank ID: _____				
Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	400 BBLS	STEEL AST	,
S/AR	SATISFACTORY	Comment: Air id 045-1570-002		
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficent	Base Sufficient	Adequate
Corrective Action				Corrective Date

Comment	
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Venting:

Yes/No	
Comment	

Flaring:

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

Predrill

Location ID: 335915

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

S/AR: _____

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

Form 2A COAs:

Group	User	Comment	Date
Agency	liny	All pits must be lined.	05/07/2010
Agency	liny	Reserve pit must be lined.	05/07/2010
Agency	liny	The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1.	05/07/2010
Agency	liny	Operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations. If fluids are conveyed via pipeline, operator must implement best management practices to contain any unintentional release of fluids.	05/07/2010
Agency	liny	The nearby hillside must be monitored for any day-lighting of drilling fluids throughout the drilling of the surface casing interval.	05/07/2010
Agency	liny	No portion of any pit that will be used to hold liquids shall be constructed on fill material, unless the pit and fill slope are designed and certified by a professional engineer, subject to review and approval by the director prior to construction of the pit. The construction and lining of the pit shall be supervised by a professional engineer or their agent. The entire base of the pit must be in cut.	05/07/2010

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:

Inspector Name: LONGWORTH, MIKE

Landman Name: _____	Phone Number: _____
Date Onsite Request Received: _____	Date of Rule 306 Consultation: _____
Request LGD Attendance: _____	
<u>LGD Contact Information:</u>	
Name: _____	Phone Number: _____ Agreed to Attend: _____
<u>Summary of Landowner Issues:</u>	

<u>Summary of Operator Response to Landowner Issues:</u>	

<u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u>	

Facility

Facility ID: 277263	Type: WELL	API Number: 045-10654	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 296959	Type: WELL	API Number: 045-16236	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 296960	Type: WELL	API Number: 045-16237	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 296961	Type: WELL	API Number: 045-16238	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 296962	Type: WELL	API Number: 045-16239	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 296965	Type: WELL	API Number: 045-16240	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 417334	Type: WELL	API Number: 045-19482	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 417340	Type: WELL	API Number: 045-19488	Status: PR	Insp. Status: PR
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Producing Well

Comment: Producing well

Facility ID: 417342	Type: WELL	API Number: 045-19490	Status: PR	Insp. Status: PR
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Producing WellComment: **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:

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: RANGELAND

Comment: **Wells have been producing since October 2011 Interim reclamation needed. Stock piles on location.**

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? _____

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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: RANGELAND _____

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
				SR	Pass	
		Compaction	Pass			
		Culverts	Pass			
		Ditches	Pass			
Berms	Pass					
Seeding	Pass					
		Gravel	Pass			
Gravel	Pass					
				MHSP	Pass	
Compaction	Pass					

Inspector Name: LONGWORTH, MIKE

S/A/V: SATISFACTOR Corrective Date: _____
Y _____

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
674702980	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3916974