

**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:

11/18/2016

Document Number:

666802731**FIELD INSPECTION FORM**

Loc ID 323994 Inspector Name: Murray, Richard On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_

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

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED

**Findings:**3 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
, Inspections		COGCCInspectionReports@terraep.com	<a href="#">Field Inspections</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
211437	WELL	PR	02/19/1998	GW	045-07197	SAVAGE RMV 72-34	PR

**General Comment:**

**Location**Overall Good: ☒

Emergency Contact Number:

Comment: Corrective Action: Date: Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Equipment:**

corrective date

Type: Ancillary equipment

# 1

Comment: Chemical unit at wellhead

Corrective Action: Date: 

Type: Plunger Lift

# 1

Comment: Corrective Action: Date: 

Type: Horizontal Heated Separator

# 1

Comment: Corrective Action: Date: **Tanks and Berms:**

Contents	#	Capacity	Type	Tanak ID	SE GPS
PRODUCED WATER	1	<100 BBLS	STEEL AST		39.484634,-107.874562
Comment:	<input type="text"/>				
Corrective Action:	<input type="text"/>				Date: <input type="text"/>

**Paint**Condition Adequate Other (Content) Other (Capacity) Other (Type) **Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficent	Base Sufficent	Adequate
Comment:	<input type="text"/>			
Corrective Action:	<input type="text"/>			Date: <input type="text"/>

**Venting:**

Yes/No NO

Comment:

Corrective Action:		Date:	
<b>Flaring:</b>			
Type			
Comment:			
Corrective Action:		Date:	

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<b>Inspected Facilities</b>				
Facility ID: 211437	Type: WELL	API Number: 045-07197	Status: PR	Insp. Status: PR
<b>Producing Well</b>				
Comment:	Plunger lift			
Corrective Action:				Date:

Environmental	
<b>Spill/Remediation:</b>	
Comment:	
Corrective Action:	Date:
Emission Control Burner (ECB): NO	
Comment:	
Pilot:	Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
		Compaction	Pass			
		Ditches	Pass			
Seeding	Pass					
Ditches	Pass					
Compaction	Pass					

Comment:

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT