

**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:

12/22/2016

Submitted Date:

12/22/2016

Document Number:

674703491**FIELD INSPECTION FORM**
 Loc ID 324183 Inspector Name: LONGWORTH, MIKE 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
Inspection, Terra TEP	970-263-2716	COGCCInspectionReports@terraep.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
262305	WELL	PR	04/10/2002	GW	045-08010	PA 31-34	PR

**General Comment:**

**Location**Overall Good: ☒**Signs/Marker:**

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

Emergency Contact Number:

Comment: 970-285-9377

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:	
Type	SEPARATOR		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

**Equipment:**

Type: Horizontal Heated Separator	# 4		corrective date
Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 2		

Comment:			
Corrective Action:		Date:	
Type: Ancillary equipment	# 1		
Comment:	Chemical container at well		
Corrective Action:		Date:	
Type: Plunger Lift	# 1		
Comment:			
Corrective Action:		Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
CONDENSATE	1	200 BBLs	STEEL AST		,
Comment:					
Corrective Action:					Date:

**Paint**

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

**Berms**

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

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	<100 BBLs	STEEL AST		,
Comment:					
Corrective Action:					Date:

**Paint**

Condition	Adequate	
Other (Content)		
Other (Capacity)	80 bbl	
Other (Type)		

**Berms**

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

**Venting:**

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

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

--	--	--	--

Inspected Facilities				
Facility ID: 262305	Type: WELL	API Number: 045-08010	Status: PR	Insp. Status: PR
Producing Well				
Comment:	Producing well			
Corrective Action:				Date: