

**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:

02/09/2017

Submitted Date:

02/09/2017

Document Number:

674703607**FIELD INSPECTION FORM**
 Loc ID 324283 Inspector Name: LONGWORTH, MIKE On-Site Inspection ☐ 2A Doc Num: _____
Operator Information:OGCC Operator Number: 10433Name of Operator: LARAMIE ENERGY LLCAddress: 1401 SEVENTEENTH STREET #1400City: DENVER State: CO Zip: 80202**Status Summary:**

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

Findings:4 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name | Phone | Email | Comment |
|----------------|----------------|-----------------------------|---|
| Bankert, Wayne | (970) 683-5419 | wbankert@laramie-energy.com | Senior Regulatory & Environmental Coordinator |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|--------------------|-------------|
| 273551 | WELL | PR | 01/01/2005 | GW | 045-10258 | OXY FEDERAL 708-11 | PR |

General Comment:

LocationOverall Good: ☒

| | | | |
|----------------------|----------------------|-------|--|
| Signs/Marker: | | | |
| Type | CONTAINERS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | BATTERY | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

Comment: 970-248-0497

Corrective Action:

Date: _____

Overall Good: ☒

| | | | |
|----------------|------|--------|--|
| Spills: | | | |
| Type | Area | Volume | |

In Containment: No

Comment:

☐ Multiple Spills and Releases?

| | | | |
|-----------------------------------|-----------------------------|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Horizontal Heated Separator | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Ancillary equipment | # 1 | | |
| Comment: | Chemical container at wells | | |
| Corrective Action: | | Date: | |
| Type: Dehydrator | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Plunger Lift | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Bird Protectors | # 2 | | |
| Comment: | | | |

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

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS | |
|------------|---|----------|-----------|---------|--------|--|
| CONDENSATE | 1 | 300 BBLS | STEEL AST | | , | |

| | |
|----------|--|
| Comment: | |
|----------|--|

| | | | |
|--------------------|--|-------|--|
| Corrective Action: | | 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 | |

| | |
|----------|--|
| Comment: | |
|----------|--|

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

Venting:

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

| | | | |
|----------|--|--|--|
| Comment: | | | |
|----------|--|--|--|

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

Flaring:

| | | |
|------|--|--|
| Type | | |
|------|--|--|

| | |
|----------|--|
| Comment: | |
|----------|--|

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

| Inspected Facilities | | | | | | | | | |
|----------------------|----------------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID: | 273551 | Type: | WELL | API Number: | 045-10258 | Status: | PR | Insp. Status: | PR |
| Producing Well | | | | | | | | | |
| Comment: | Producing well | | | | | | | | |
| Corrective Action: | | | | | | Date: | | | |

Reclamation - Storm Water - Pit**Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|--|--------------------------|---------|
| | | Ditches | Pass | | | |
| | | Culverts | Pass | | | |
| Gravel | Pass | | | | | |
| | | | | Material Handling And Spill Prevention | Pass | |
| Seeding | Pass | | | | | |
| Berms | Pass | | | | | |

Comment:

Corrective Action:

Date: _____

Pits: ☒ NO SURFACE INDICATION OF PIT