

**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:

02/27/2017

Submitted Date:

02/27/2017

Document Number:

674703672**FIELD INSPECTION FORM**

Loc ID 335330 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:5 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
262909	WELL	PR	12/20/2002	GW	045-08074	FEDERAL PA 23-26	PR
263760	WELL	PR	12/18/2002	GW	045-08140	FEDERAL PA 323-26	PR
272644	WELL	PR	01/08/2007	GW	045-10114	FEDERAL PA 423-26	PR

General Comment:

LocationOverall Good: ☒

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

Equipment:			corrective date
Type: Horizontal Heated Separator	# 6		
Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 4		

Comment:			
Corrective Action:		Date:	
Type: Ancillary equipment	# 1		
Comment:	Chemical container at wells		
Corrective Action:		Date:	
Type: Plunger Lift	# 3		
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:				

Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	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
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:				

Venting:

Yes/No	NO		
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Comment:			
Corrective Action:		Date:	
Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

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Inspected FacilitiesFacility ID: 262909 Type: WELL API Number: 045-08074 Status: PR Insp. Status: PR**Producing Well**Comment: Producing well

Corrective Action:

Date:

Facility ID: 263760 Type: WELL API Number: 045-08140 Status: PR Insp. Status: PR**Producing Well**Comment: Producing well

Corrective Action:

Date:

Facility ID: 272644 Type: WELL API Number: 045-10114 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			
				Material Handling And Spill Prevention	Pass	
		Culverts	Pass			
Seeding	Pass					
Compaction	Pass					
		Gravel	Pass			
Ditches	Pass					
Gravel	Pass					
		Compaction	Pass			

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT