

**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:

01/19/2017

Submitted Date:

03/01/2017

Document Number:

673714814**FIELD INSPECTION FORM**

Loc ID 438156 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10399Name of Operator: NIGHTHAWK PRODUCTION LLCAddress: 1805 SHEA CENTER DR #290City: HIGHLANDS State: CO Zip: 80129**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
Henkin, Joyce	(303) 407-9609	joycehenkin@nighthawkenergy.com	
Rezendes, Joe		JoeRezendes@nighthawkenergy.com	
Spear, Sam	(970) 554-1988	samspear@nighthawkenergy.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
438155	WELL	PR	04/30/2015	OW	121-11045	SALEN 14-35	PR

General Comment:

LocationOverall Good: ☐**Signs/Marker:**

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

Emergency Contact Number:

Comment: 303-638-6096

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: Emission Control Device	# 2		
Comment:			
Corrective Action:		Date:	
Type: Vertical Heater Treater	# 1		
Comment:			
Corrective Action:		Date:	

Venting:

Yes/No	YES		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities									
Facility ID:	438155	Type:	WELL	API Number:	121-11045	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	PR. Jul 2016 last reported to COGCC database.								
Corrective Action:								Date:	

Optical Gas Imaging SurveySurvey Type: RoutineCurrent Operations: ☒ Production ☐ Workover ☐ Flowback ☐ Referred to APCD

GPS(entrance of location): Lat: _____ Long: _____

Wind: Light Speed: _____ (mph) Direction From: west Weather: Clear Temperature: 44 (F)

Assisting Staff: _____ Camera #: _____

☐ Visible Smoke ☐ Referred to CDPHE

Times Surveyed

Equipment Surveyed

Time Survey Start	AM/PM	Time Survey End	AM/PM
10:25	AM	10:29	AM

Equipment
Wellhead(s)
Oil Tank(s)
Other
Water Tank(s)

Comment: Two ECDs venting to the east. Enardo valves on tanks, tanks and wellhead not venting. No action required.

Corrective Action: _____ Date: _____

COGCC Comments

Comment	User	Date
<u>Flir Survey only</u>	ShermaSe	03/03/2017

Attached DocumentsYou can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
673714953	Salen Flir 1/19/2017	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4090565
673714955	Nighthawk Salen 14-35 Flir	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4090566