

**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:

05/12/2017

Submitted Date:

05/12/2017

Document Number:

680401492**FIELD INSPECTION FORM**Loc ID 335334 Inspector Name: BROWNING, CHUCK 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:**10 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
, "		COGCCInspectionReports@terraep.com	<a href="#">All Inspections</a>
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	<a href="#">Field Inspector</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
256099	WELL	PR	09/20/1999	GW	045-07429	CLOUGH RMV 220-21	PR
276466	WELL	PR	09/26/2005	GW	045-10468	CLOUGH RWF 534-21	PR
276467	WELL	SI	02/01/2017	DSPW	045-10469	Clough RWF 434-21	SI

**General Comment:**[UIC-5 yr MIT.](#)

**Location**

<b>Lease Road:</b>			
Type	Main		
comment:			
Corrective Action		Date:	
Type	Access		
comment:			
Corrective Action		Date:	

Overall Good: ☒

<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:		
Comment:		
Corrective Action:		Date: _____

Overall Good: ☒

<b>Spills:</b>			
Type	Area	Volume	

In Containment: No

Comment: \_\_\_\_\_

☐ Multiple Spills and Releases?

<b>Fencing/:</b>			
Type	WELLHEAD		
Comment:	Hogwire		
Corrective Action:		Date:	
Type	SEPARATOR		
Comment:	Hogwire		
Corrective Action:		Date:	
Type	TANK BATTERY		
Comment:	Hogwire		
Corrective Action:		Date:	

<b>Equipment:</b>			corrective date
Type: Horizontal Heated Separator	# 2		
Comment:			
Corrective Action:		Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS	
CONDENSATE	1	300 BBLs	STEEL AST		39.506437,-107.893888	
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		39.506437,-107.893888	
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:

**Venting:**

Yes/No	YES		
Comment:	Bradenhead valves open		
Corrective Action:		Date:	

**Flaring:**

Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**Facility ID: 256099 Type: WELL API Number: 045-07429 Status: PR Insp. Status: PR**Producing Well**Comment: Plunger lift

Corrective Action:

Date:

Facility ID: 276466 Type: WELL API Number: 045-10468 Status: PR Insp. Status: PR**Producing Well**Comment: Plunger lift

Corrective Action:

Date:

Facility ID: 276467 Type: WELL API Number: 045-10469 Status: SI Insp. Status: SI**Underground Injection Control**

UIC Violation: \_\_\_\_\_

Maximum Injection Pressure: \_\_\_\_\_

UIC RoutineInj./Tube: Pressure or inches of Hg \_\_\_\_\_  
(e.g. 30 psig or -30" Hg)

Previous Test Pressure \_\_\_\_\_

MPP \_\_\_\_\_

Inj Zone: WFCM

TC: Pressure or inches of Hg \_\_\_\_\_

Previous Test Pressure \_\_\_\_\_

Last MIT: 06/07/2012

Brhd: Pressure or inches of Hg \_\_\_\_\_

Previous Test Pressure \_\_\_\_\_

AnnMTReq: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

Date: \_\_\_\_\_

Method of Injection: \_\_\_\_\_

Test Type: 5 YearTbg psi: 1894Csg psi: 2125BH psi: 0Insp. Status: PassComment: UIC-5 yr MIT.Pressure well to 2125 psi. Hold for 15 min. Final pressure 2100 psi. -25 psi loss. OK

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
Berms	Pass	Gravel	Pass	Self Inspection	Pass	
Gravel	Pass	Ditches	Pass			

Comment: Corrective Action: Date: **Pits:** ☐ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
401281990	INSPECTION SUBMITTED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4146181">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4146181</a>