

**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:

06/16/2017

Submitted Date:

06/19/2017

Document Number:

680401667

FIELD INSPECTION FORM

Loc ID 311853 Inspector Name: BROWNING, CHUCK On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

OGCC Operator Number: 10384
Name of Operator: GENESIS GAS & OIL COLORADO LLC
Address: 1660 LINCOLN ST STE 2100
City: DENVER State: CO Zip: 80246

Findings:

7 Number of Comments
0 Number of Corrective Actions
 Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector
Jensen, David	(816) 222-7500	djensen@genesisco.com	Exec. VP

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
286511	WELL	SI	12/04/2013	GW	103-10888	FLETCHER GULCH 3-31	SI
293056	WELL	SI	12/17/2012	DSPW	103-11095	FLETCHER GULCH 3-31WD	SI

General Comment:

[Routine UIC Inspection.](#)

Location

Lease Road:			
Type	Main		
comment:			
Corrective Action			Date:
Type	Access		
comment:			
Corrective Action			Date:

Overall Good:

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

Emergency Contact Number:			
Comment:	<input type="text"/>		
Corrective Action:	<input type="text"/>		Date: _____

Overall Good:

Spills:			
Type	Area	Volume	
In Containment:	No		
Comment:	<input type="text"/>		
<input type="checkbox"/> Multiple Spills and Releases?			

Fencing/:			
Type	WELLHEAD		
Comment:	Hogwire & T-post		
Corrective Action:			Date:

Equipment:						corrective date
Type: Prime Mover	# 1					
Comment:	Pump inside housing					
Corrective Action:						Date:
Type: Vertical Separator	# 1					
Comment:						
Corrective Action:						Date:

Tanks and Berms:						
Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	4	400 BBLS	HEATED STEEL AST		40.083106,-108.609896	

Comment:		
Corrective Action:		Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficent	Base Sufficent	Adequate
Comment:				
Corrective Action:				Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 286511 Type: WELL API Number: 103-10888 Status: SI Insp. Status: SI

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment: Rotary Pump

Corrective Action: _____ Date: _____

Facility ID: 293056 Type: WELL API Number: 103-11095 Status: SI Insp. Status: SI

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube:	Pressure or inches of Hg <u>0</u>	Previous Test Pressure _____	MPP _____
	(e.g. 30 psig or -30" Hg)		Inj Zone: <u>SEGO</u>
TC:	Pressure or inches of Hg <u>0</u>	Previous Test Pressure _____	Last MIT: <u>11/04/2013</u>
Brhd:	Pressure or inches of Hg <u>0</u>	Previous Test Pressure _____	AnnMTReq: _____

Comment: Routine UIC Inspection. Well shut in.

Corrective Action: _____ Date: _____

Method of Injection: PUMP FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

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
Gravel	Pass	Gravel	Pass	Self Inspection	Pass	

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT