

**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:

07/12/2017

Submitted Date:

07/12/2017

Document Number:

680401686**FIELD INSPECTION FORM**Loc ID 323893 Inspector Name: BROWNING, CHUCK On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 10433Name of Operator: LARAMIE ENERGY LLCAddress: 760 HORIZON DRIVE #101City: GRAND JUNCTION State: CO Zip: 81506**Status Summary:**

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

**Findings:**9 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Bankert, Wayne	970-683-5419	cogccnotifications@laramie-energy.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
211112	WELL	IJ	01/15/2013	DSPW	045-06871	CASCADE CREEK 604-1	AC

**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:	

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:	Wellhead inside housing		
Corrective Action:		Date:	
Type	TANK BATTERY		
Comment:	Pipe barricade		
Corrective Action:		Date:	
Type	SEPARATOR		
Comment:	Pipe barricade		
Corrective Action:		Date:	

<b>Equipment:</b>			corrective date
Type: Pig Station	# 1		
Comment:			
Corrective Action:		Date:	
Type: Emission Control Device	# 1		
Comment:			
Corrective Action:		Date:	

Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:			Date:
Type: Prime Mover	# 1		
Comment:	Pump house		
Corrective Action:			Date:
Type: Ancillary equipment	# 1		
Comment:	Generator		
Corrective Action:			Date:

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	8	400 BBLs	STEEL AST		39.545617,-108.230422	
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: 211112 Type: WELL API Number: 045-06871 Status: IJ Insp. Status: AC**Underground Injection Control**

UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: \_\_\_\_\_

UIC Routine

Inj./Tube:	Pressure or inches of Hg _____ (e.g. 30 psig or -30" Hg)	Previous Test Pressure _____	MPP _____
TC:	Pressure or inches of Hg _____	Previous Test Pressure _____	Inj Zone: <u>WMFK</u>
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	Last MIT: <u>07/20/2012</u>
			AnnMTReq: _____

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

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

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

Test Type: 5 Year Tbg psi: 1050 Csg psi: 0 BH psi: 0Insp. Status: PassComment: UIC-5 yr MIT.  
Pressure well to 1050 psi. Hold for 15 min. Final pressure 1040 psi. -10 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
Gravel	Pass	Gravel	Pass	Self Inspection	Pass	
Berms	Pass	Ditches	Pass			

Comment:

Corrective Action:

Date:

Pits: ☐ NO SURFACE INDICATION OF PIT