

**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:

07/31/2017

Submitted Date:

08/01/2017

Document Number:

666803430**FIELD INSPECTION FORM**
 Loc ID 335128 Inspector Name: Murray, Richard 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
, Inspections		COGCCInspectionReports@terraep.com	Field Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
260223	WELL	PR	07/16/2002	GW	045-07836	CLOUGH RMV 228-27	PR
281271	WELL	PR	05/28/2006	GW	045-11422	CLOUGH RWF 422-27	PR
281272	WELL	PR	05/21/2006	GW	045-11423	CLOUGH RWF 522-27	PR

General Comment:[Shared facilities with location ID 324161](#)

LocationOverall Good: ☒

Emergency Contact Number:

Comment: 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: Plunger Lift

3

Comment: Corrective Action: Date:

Type: Ancillary equipment

0

Comment: Corrective Action: Date:

Type: Horizontal Heated Separator

4

Comment: Corrective Action: Date: **Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS	
CONDENSATE	1	300 BBLS	STEEL AST		39.499362,-107.878185	
Comment: <input type="text"/>						
Corrective Action: <input type="text"/>					Date: <input type="text"/>	

PaintCondition Adequate Other (Content) Other (Capacity) Other (Type) **Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment: <input type="text"/>				
Corrective Action: <input type="text"/>				Date: <input type="text"/>

Venting:

Yes/No NO

Comment:

Corrective Action:		Date:	
Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

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Inspected FacilitiesFacility ID: 260223 Type: WELL API Number: 045-07836 Status: PR Insp. Status: PR**Producing Well**Comment: Plunger lift

Corrective Action:

Date:

Facility ID: 281271 Type: WELL API Number: 045-11422 Status: PR Insp. Status: PR**Producing Well**Comment: Plunger lift

Corrective Action:

Date:

Facility ID: 281272 Type: WELL API Number: 045-11423 Status: PR Insp. Status: PR**Producing Well**Comment: Plunger lift

Corrective Action:

Date:

Environmental	
Spill/Remediation:	
Comment:	
Corrective Action:	Date:
Emission Control Burner (ECB): NO	
Comment:	
Pilot:	Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
		Culverts	Pass			
Seeding	Pass					
		Ditches	Pass			
		Gravel	Pass			
Gravel	Pass					

Comment:

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT