

**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:

09/05/2017

Submitted Date:

09/06/2017

Document Number:

689400244

FIELD INSPECTION FORM

Loc ID 322350 Inspector Name: CONKLIN, CURTIS 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: 10112
Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC
Address: 5057 KELLER SPRINGS RD STE 650
City: ADDISON State: TX Zip: 75001

Findings:

- 3 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

Contact Information:

| Contact Name | Phone | Email | Comment |
|------------------|----------------|---------------------------------|--------------------|
| Allred, Josh | (970) 629-5914 | jallred@foundationenergy.com | Field Supervisor |
| Contact, General | | regulatory@foundationenergy.com | Regulatory |
| Hartman, Robert | (970) 244-3041 | bhartman@blm.gov | Petroleum Engineer |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 210345 | WELL | PR | 08/15/1994 | GW | 045-06101 | FEDERAL 2-23 | PR |

General Comment:

(This area is intentionally left blank for general comments.)

Location

Overall Good:

Signs/Marker:

| | | | |
|--------------------|----------------------|-------|--|
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| 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:

Multiple Spills and Releases?

Fencing/:

| | | | |
|--------------------|--------------|-------|--|
| Type | TANK BATTERY | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Equipment:

| Type | # | | corrective date |
|-----------------------------|-----|-------|-----------------|
| Horizontal Heated Separator | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Bird Protectors | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Gas Meter Run | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|---|----------|-------------|---------|--------|
| PRODUCED WATER | 1 | <50 BBLs | PBV PLASTIC | | , |
| Comment: | | | | | |
| Corrective Action: | | Date: | | | |

Paint

| | |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

| | |
|------------------|--|
| Other (Content) | |
| Other (Capacity) | |
| Other (Type) | |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|--------------------|----------|---------------------|---------------------|-------------|
| Earth | 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: 210345 Type: WELL API Number: 045-06101 Status: PR Insp. Status: PR

Reclamation - Storm Water - Pit

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | | | | | |

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT