

**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:

11/07/2017

Submitted Date:

11/08/2017

Document Number:

689400623**FIELD INSPECTION FORM**

Loc ID 322006 Inspector Name: CONKLIN, CURTIS On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10515Name of Operator: GUNNISON ENERGY LLCAddress: 1801 BROADWAY #1200City: DENVER State: CO Zip: 80202**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**5 Number of Comments1 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Ash, Margaret		margaret.ash@state.co.us	
McWilliams, Dan	(970) 986-2927	dan.mcwilliams@oxbow.com	
Labowskie, Steve		steve.labowskie@state.co.us	
Kellerby, Shaun		shaun.kellerby@state.co.us	NW Supervisor

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
284839	WELL	SI	11/05/2008	DSPW	029-06095	ALLEN 1291 12-13	SI

General Comment:

This is a routine field inspection, any corrective actions not addressed from previous inspections are still applicable.

LocationOverall Good: ☒

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

Emergency Contact Number:

Comment: (970) 874-7697

Corrective Action:

Date:

Good Housekeeping:

Type	UNUSED EQUIPMENT		
Comment:	Hoses at wellhead. See photos.		
Corrective Action:	Comply with Rule 603.f.	Date:	12/08/2017

Overall Good: ☐

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Equipment:**

corrective date

Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	6	400 BBLS	HEATED STEEL AST		,	
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

Inspected Facilities									
Facility ID:	284839	Type:	WELL	API Number:	029-06095	Status:	SI	Insp. Status:	SI
Idle Well									
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____									
Comment: <input type="text" value="Disposal well. Last MIT was 10/4/17."/> _____									
Corrective Action: <input type="text"/> _____ 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					
Compaction	Pass	Gravel	Pass			
Berms	Pass	Compaction	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
401453763	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4297770
689400624	Allen 1291 12-13	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4297767