

**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:

11/16/2017

Submitted Date:

11/20/2017

Document Number:

689700628

**FIELD INSPECTION FORM**

Loc ID 322539 Inspector Name: LONGWORTH, MIKE 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: 96850  
Name of Operator: TEP ROCKY MOUNTAIN LLC  
Address: PO BOX 370  
City: PARACHUTE State: CO Zip: 81635

**Findings:**

- 5 Number of Comments
- 1 Number of Corrective Actions
- Corrective Action Response Requested

**Contact Information:**

Contact Name	Phone	Email	Comment
Inspection, Terra TEP	970-263-2760	COGCCInspectionReports@terraep.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
210752	WELL	PR	09/01/2012	GW	045-06510	ARCO DEEP 1-27	PR
322539	LOCATION	AC	09/01/2012		-	ARCO DEEP-66S97W 27NWSE	AC

**General Comment:**

[Routine General inspection](#)

Location			
<b>Lease Road:</b>			
Type	Access		
comment:			
Corrective Action:		Date:	
Overall Good: <input checked="" type="checkbox"/>			
<b>Signs/Marker:</b>			
Type	CONTAINERS		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Emergency Contact Number:			
Comment:	<input type="text" value="970-285-9377"/>		
Corrective Action:	<input type="text"/>		Date: _____
<b>Good Housekeeping:</b>			
Type	WEEDS		
Comment:	Dead weed debris covering location.		
Corrective Action:	Comply with Rule 603.f .		Date: 11/27/2017
Overall Good: <input type="checkbox"/>			
<b>Spills:</b>			
Type	Area	Volume	
In Containment: No			
Comment:	<input type="text"/>		
<input type="checkbox"/> Multiple Spills and Releases?			
<b>Fencing/:</b>			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	SEPARATOR		
Comment:			
Corrective Action:		Date:	

Type	TANK BATTERY		
Comment:			
Corrective Action:		Date:	

<b>Equipment:</b>			corrective date
Type: Plunger Lift	# 1		
Comment:			
Corrective Action:		Date:	
Type: Ancillary equipment	# 1		
Comment:	Chemical container at well.		
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 3		
Comment:			
Corrective Action:		Date:	
Type: Dehydrator	# 1		
Comment:			
Corrective Action:		Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	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
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:				Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	400 BBLs	STEEL AST		,
Comment:					
Corrective Action:					Date:

Paint

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

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficent	Base Sufficient	Adequate

Comment:	
Corrective Action:	Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
CONDENSATE	1	300 BBLs	STEEL AST		,

Comment:	
Corrective Action:	Date:

**Paint**

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

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficent	Base Sufficient	Adequate

Comment:	
Corrective Action:	Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
METHANOL	2	<50 BBLs	STEEL AST		,

Comment:	
Corrective Action:	Date:

**Paint**

Condition	Adequate	
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Other (Content)	
Other (Capacity) 500 gallons	
Other (Type)	

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficent	Base Sufficient	Adequate

Comment:	
Corrective Action:	Date:

**Venting:**

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

<b>Flaring:</b>			
Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**

Facility ID: 210752 Type: WELL API Number: 045-06510 Status: PR Insp. Status: PR

**Producing Well**

Comment:

Corrective Action:

Date:

Facility ID: 322539 Type: LOCATION API Number: - Status: AC Insp. Status: AC

**Producing Well**

Comment: [Producing well](#)

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
		Ditches	Pass			
Compaction	Pass					
				Material Handling And Spill Prevention	Pass	
Seeding	Pass					
		Culverts	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
401464218	INSPECTION SUBMITTED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4306096">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4306096</a>
689700631	ARCO Deep 1-27	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4306092">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4306092</a>