

**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:

12/07/2017

Submitted Date:

12/07/2017

Document Number:

680402271**FIELD INSPECTION FORM**Loc ID 417353 Inspector Name: BROWNING, CHUCK 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:**12 Number of Comments1 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Labowskie, Steve		steve.labowskie@state.co.us	
McWilliams, Dan		dan.mcwilliams@oxbow.com	
		dnr_cogccengineering@state.co.us	
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector
Leonard, Mike		mike.leonard@state.co.us	
Downey, Robert	303-296-4222	robert.downey@oxbow.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
417354	WELL	SI	12/12/2013	OW	029-06109	SPU COCKROFT 1294 23-41D-H	TA
430938	WELL	AB	10/15/2012	GW	029-06112	SPU COCKROFT 1294 23-41D H1R	SI

General Comment:

Location

Lease Road:			
Type	Access		
comment:			
Corrective Action	L	Date:	
Type	Main		
comment:			
Corrective Action	L	Date:	

Overall Good: ☒

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

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good: ☒

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:	Panel fence		
Corrective Action:		Date:	
Type	LOCATION		
Comment:	Barbed wire		
Corrective Action:		Date:	

Equipment:			corrective date
Type: Horizontal Heated Separator	# 1		
Comment:	Disconnected, in process of abandonment.		
Corrective Action:		Date:	

Type: Emission Control Device	# 2	
Comment:	Combustor and emergency flare disconnected in process of abandonment.	
Corrective Action:		Date:
Type: Flow Line	#	
Comment:	All flowline risers noted in previous inspection (Doc#680401665) have been removed.	
Corrective Action:		Date:
Type: Pump Jack	# 1	
Comment:	Wellhead chained closed.	
Corrective Action:		Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	400 BBLS	HEATED STEEL AST		38.999025,-107.859106
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:			

Contents	#	Capacity	Type	Tank ID	SE GPS
OTHER	1		GAS PLANT		39.999347,-107.858381
Comment:	NGL (disconnected, scheduled for removal)				
Corrective Action:	Date:				

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:				
Corrective Action:	Date:			

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	2	400 BBLS	HEATED STEEL AST		38.999025,-107.859106

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:	Same berms as produced water tank.			
Corrective Action:			Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected FacilitiesFacility ID: 417354 Type: WELL API Number: 029-06109 Status: SI Insp. Status: TA**Idle Well**Purpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: _____Comment: Last MIT 5/29/2014. Doc#200407438.

Corrective Action: _____ Date: _____

Facility ID: 430938 Type: WELL API Number: 029-06112 Status: AB Insp. Status: SI**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____Comment: Well shut in 11/2015. No current MIT on record or delinquent as required by Rule 326.b.1.Corrective Action: Contact dnr_cogccengineering@state.co.us with resolution plan. Date: 12/22/2017

Reclamation - Storm Water - Pit**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Berms	Pass	Gravel	Pass	Material Handling And Spill Prevention	Pass	Secondary containment of chemicals
Gravel	Pass	Ditches	Pass			
Retention Ponds	Pass	Culverts	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
401480123	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4320743
680402277	Inspection photos 12/7/2017	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4320742