

**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:

05/18/2018

Submitted Date:

05/18/2018

Document Number:

690001607**FIELD INSPECTION FORM**Loc ID 159601 Inspector Name: Carlile, Craig On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 10373Name of Operator: NGL WATER SOLUTIONS DJ LLCAddress: 3773 CHERRY CRK NORTH DR #1000City: DENVER State: CO Zip: 80209**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
Mike Guinn		mike.guinn@nglep.com	
Joshua Hamblen		joshua.hamblen@nglep.com	
Burn, Diana		diana.burn@state.co.us	
Jowe Mora		jose.mora-osio@nglep.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
159600	WELL	IJ	05/02/2015	DSPW	123-40968	NGL C6A	SI

General Comment:

LocationOverall Good: ☒**Signs/Marker:**

Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:		Date:	
Corrective Action:			

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Fencing/:**

Type	WELLHEAD		
Comment:	Shack		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
			CENTRALIZED BATTERY		,
Comment:	Shared Battery Location Number: 310159				
Corrective Action:				Date:	

Paint

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

Berms

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

Venting:

Yes/No		
Comment:		
Corrective Action:		Date:

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 159600 Type: WELL API Number: 123-40968 Status: IJ Insp. Status: SI

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg 1250 Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: LYNS
 TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 03/19/2015
 Brhd: Pressure or inches of Hg 150 psi Previous Test Pressure _____ AnnMTReq: _____

Comment: Bradenhead pressure issue.
Max Inj Pressure 2250 psi

Corrective Action: Contact Dianne Burns, COGCC Engineering Group, concerning resolution to continuing bradenhead pressure issue. Date: 06/28/2018

Method of Injection: PUMP FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

BradenHead

Comment: Plumbed to surface.

Corrective Action: _____ Date: _____

COGCC Comments

Comment	User	Date
<u>Routine UIC Inspection.</u> <u>Facility was not operating in commercial capacity at time of inspection.</u> <u>Continuing bradenhead pressure issue, 150 psi at time of inspection. Contact COGCC Engineering Staff (Dianne Burns) for resolution plan.</u> <u>Last MIT 3/19/2015.</u>	carlilec	05/18/2018

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
401645810	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4467791
690001608	Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4467788