

**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:

06/27/2018

Submitted Date:

06/28/2018

Document Number:

689801316**FIELD INSPECTION FORM**
 Loc ID 312838 Inspector Name: Waldron, Emily On-Site Inspection ☐ 2A Doc Num:
Operator Information:OGCC Operator Number: 10323Name of Operator: ENTEK GRB LLCAddress: 165 SOUTH UNION #366City: LAKEWOOD State: CO Zip: 80228**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**10 Number of Comments1 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
parsons, Kim		kparsons@entekenergy.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
222553	WELL	SI	04/16/2012	DSPW	081-05571	C F & I CORP. 1	SI

General Comment:

Routine UIC inspection.

LocationOverall Good: ☒

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

Emergency Contact Number:

Comment: 303-282-4933

Corrective Action:

Date: _____

Overall Good: ☒

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Equipment:			corrective date
Type: Horizontal Heated Separator	# 1		
Comment:	40.98993, -107.32817		
Corrective Action:		Date:	
Type: Horizontal Separator	# 1		
Comment:	40.98993, -107.32817		
Corrective Action:		Date:	
Type: Dehydrator	# 1		
Comment:	40.99015, -107.32803		
Corrective Action:		Date:	
Type: Horizontal Heater Treater	# 1		
Comment:	40.99009, -107.32843		
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		

Comment:	40.99009, -107.32843		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS	
CRUDE OIL	1	300 BBLS	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			Adequate
Comment:				
Corrective Action:				
			Date:	

Contents	#	Capacity	Type	Tank ID	SE GPS	
CRUDE OIL	2	400 BBLS	STEEL AST		40.989790,-107.328270	
Comment:						
Corrective Action:						Date:

Paint

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

Berms

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

Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	8	500 BBLS	STEEL AST		40.990040,-107.328070	
Comment:						
Corrective Action:						Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
	Inadequate			Inadequate
Comment:	No berm observed around produced water tanks. Tanks on edge of location which borders gully.			
Corrective Action:	Install or repair required BMPs per Rule 1002.f.			Date: 07/30/2018

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected FacilitiesFacility ID: 222553 Type: WELL API Number: 081-05571 Status: SI Insp. Status: SI**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg 0 Previous Test Pressure _____ MPP _____
(e.g. 30 psig or -30" Hg) Inj Zone: MVRD

TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 06/18/2014

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: Routine UIC inspection. Well shut-in at time of inspection.

Corrective Action: _____ Date: _____

Method of Injection: _____

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

Insp. Status: _____

Comment: _____

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

Comment: [No apparent soil migration; erosion or soil movement.](#)

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
401695280	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4515672
689801317	Inspection Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4515668