

**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:

10/01/2018

Submitted Date:

10/21/2018

Document Number:

679701163**FIELD INSPECTION FORM**

Loc ID 315374 Inspector Name: Moran, Rick On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10654Name of Operator: LASSO OIL & GAS LLCAddress: 3021 RIDGE RD #156City: ROCKWALL State: TX Zip: 75032**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

**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE**

Contact Information:

Contact Name	Phone	Email	Comment
Freeman, Kris	254-717-0435	kfreeman@31operating.com	
Pesicka, Conor	970-415-0789	conor.pesicka@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
230731	WELL	PR	03/01/2018	GW	103-08400	CONTINENTAL 7-22	PR

General Comment:

Routine well inspection. Any corrective action(s) from previous inspections that have not been addressed are still applicable.

Location				
Lease Road:				
Type	Access			
comment:				
Corrective Action	L			Date:
Overall Good: <input checked="" type="checkbox"/>				
Signs/Marker:				
Type	WELLHEAD			
Comment:				
Corrective Action:				Date:
Type	BATTERY			
Comment:	Sign or label not posted or information inaccurate on tanks or containers. (Tank sign is missing 100 bbl capacity, operator, and emergency contact number)			
Corrective Action:	Install sign to comply with Rule 210.d.			Date: 11/23/2018
Emergency Contact Number:				
Comment:	800-209-9762			
Corrective Action:				Date: _____
Good Housekeeping:				
Type	TRASH			
Comment:				
Corrective Action:				Date:
Overall Good: <input checked="" type="checkbox"/>				
Spills:				
Type	Area	Volume		
In Containment: No				
Comment: _____				
<input type="checkbox"/> Multiple Spills and Releases?				
Equipment:				
Type: Bird Protectors	# 1			corrective date
Comment:				
Corrective Action:				Date:
Type: Deadman # & Marked	# 4			
Comment:				
Corrective Action:				Date:
Type: Plunger Lift	# 1			
Comment:				
Corrective Action:				Date:
Type: Horizontal Heated Separator	# 1			
Comment:				
Corrective Action:				Date:

Type: Gas Meter Run	# 1	
Comment:		
Corrective Action:		Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	100 BBLS	Open Top		,
Comment:	grid on top of tank has gaps				
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:

Venting:

Yes/No	YES	
Comment:		
Corrective Action:		Date:

Flaring:

Type	
Comment:	
Corrective Action:	Date:

Inspected Facilities									
Facility ID:	230731	Type:	WELL	API Number:	103-08400	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	producing well on plunger lift								
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: 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
401804259	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4616479
679701164	Inspection photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4616477