

**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:

09/18/2019

Submitted Date:

09/20/2019

Document Number:

687905513

FIELD INSPECTION FORM
 Loc ID 456205 Inspector Name: Stewart, Joseph On-Site Inspection ☐ 2A Doc Num:
Operator Information:

OGCC Operator Number: 10464

Name of Operator: CATAMOUNT ENERGY PARTNERS LLC

Address: 1801 BROADWAY #1000

City: DENVER State: CO Zip: 80202

Status Summary:☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**

14 Number of Comments

2 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
Labowskie, Steve		steve.labowskie@state.co.us	COGCC
Inspections, All		inspections@catamountep.com	All Inspections
Brown, Walt	970-385-1372	wabrown@fs.fed.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
280573	WELL	DG	09/01/2018	LO	007-06217	EBC 7	DG
280574	WELL	DG	09/01/2018	LO	007-06218	EBC 3	WO
456220	WELL	DG	09/16/2018	GW	007-06332	EBC 5	WO
465160	WELL	DG	06/23/2019		007-06335	EBC 2	WO
465161	WELL	XX	06/20/2019		007-06336	EBC 1	WO
465162	WELL	DG	06/24/2019		007-06337	EBC 4	WO

General Comment:

Site inspection with drilling equipment on location. At time of this inspection, EBC #'s 3,4 and 7 had the 7" intermediate casing drilled, EBC #1 and #2 had laterals drilled and EBC #5 had casing and 1st lateral frilled. No wells have all been drilled and completed. Photos at the end of this report.

Location

Lease Road:			
Type	Access		
comment:	Forest service gravel access road.		
Corrective Action	L	Date:	

Overall Good: ☐

Signs/Marker:			
Type	WELLHEAD		
Comment:	Signs for all 6 corresponding wells located at the entrance to the location.		
Corrective Action:		Date:	

Emergency Contact Number:

Comment: Emergency contact information posted on all signs.

Corrective Action: Date: _____

Overall Good: ☐

Spills:					
Type	Area	Volume			

In Containment: No

Comment: _____

☐ Multiple Spills and Releases?

Equipment:			corrective date
Type: Other	# 1		
Comment:	Drilling equipment on location.		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
OTHER	5	500 BBLs	STEEL AST		,
Comment:	Tanks used for drilling purpose.				
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Other	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:	Polytec berms with PVC liner in containment.			
Corrective Action:				Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Location Construction

Location ID: 465161 CDP: _____

Comment: Topsoil appears to be stored in a manner that does not promote microbes (Too Tall). Waddles at base and covered with weeds. See Photo#

Corrective Action: Contact SW reclamation specialist about topsoil storage.

Date: _____

Form 2A COAs:

Comment: Access road appears to be maintained with stormwater controls and culverts per COA's.

Corrective Action:

Date: _____

Wildlife BMPs:

Comment:

Corrective Action:

Date: _____

Stormwater:

Erosion BMPs	Present	Other BMPs	Present
WADDLES	Yes		
Comments: Erosion BMPs: _____ Other BMPs: _____ Corrective Action: _____ Date: _____			
		Self Inspection	Yes`
Comments: Erosion BMPs: _____ Other BMPs: _____ Corrective Action: _____ Date: _____			
DITCHES	Yes		
Comments: Erosion BMPs: _____ Other BMPs: _____ Corrective Action: _____ Date: _____			
BERMS	Yes		
Comments: Erosion BMPs: _____ Other BMPs: _____ Corrective Action: _____ Date: _____			
Comment: _____ _____ Date: _____			

Corrective
Action:

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____
Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____
Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____
Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Inspected FacilitiesFacility ID: 280573 Type: WELL API Number: 007-06217 Status: DG Insp. Status: DG**Well Drilling**

Rig: Rig Name: Ensign 145 Pusher/Rig Manager: Jake Richter
 Permit Posted: Yes Access Sign: Yes

Well Control Equipment:

Pipe Ram: YES Blind Ram: YES Hydri Type: YES
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: YES

Drill Fluids**Management:**

Lined Pit: NO Unlined Pit: NO Closed Loop: YES Semi-Closed Loop: _____
 Multi-Well: YES Disposal Location: _____
 Comment: _____
 Corrective Action: _____ Date: _____

Facility ID: 280574 Type: WELL API Number: 007-06218 Status: DG Insp. Status: WO**Well Drilling**

Rig: Rig Name: Ensign 145 Pusher/Rig Manager: Jake Richter
 Permit Posted: Yes Access Sign: Yes

Well Control Equipment:

Pipe Ram: YES Blind Ram: YES Hydri Type: YES
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: YES

Drill Fluids**Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: YES Semi-Closed Loop: _____
 Multi-Well: YES Disposal Location: _____
 Comment: _____
 Corrective Action: _____ Date: _____

Facility ID: 456220 Type: WELL API Number: 007-06332 Status: DG Insp. Status: WO**Well Drilling**

Rig: Rig Name: Ensign 145 Pusher/Rig Manager: Jake Richter
 Permit Posted: Yes Access Sign: Yes

Well Control Equipment:

Pipe Ram: YES Blind Ram: YES Hydri Type: YES
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids**Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: YES Semi-Closed Loop: _____
 Multi-Well: YES Disposal Location: _____
 Comment: _____
 Corrective Action: _____ Date: _____

Facility ID: 465160 Type: WELL API Number: 007-06335 Status: DG Insp. Status: WO

Well Drilling

Rig: Rig Name: Ensign 145 Pusher/Rig Manager: Jake Richter
 Permit Posted: Yes Access Sign: Yes

Well Control Equipment:

Pipe Ram: YES Blind Ram: YES Hydril Type: YES
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: YES Semi-Closed Loop: _____
 Multi-Well: YES Disposal Location: _____

Comment: _____

Corrective Action: _____ Date: _____

Facility ID: 465161 Type: WELL API Number: 007-06336 Status: XX Insp. Status: WO

Well Drilling

Rig: Rig Name: Ensign 145 Pusher/Rig Manager: Jake Richter
 Permit Posted: Yes Access Sign: Yes

Well Control Equipment:

Pipe Ram: YES Blind Ram: YES Hydril Type: YES
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: YES Semi-Closed Loop: _____
 Multi-Well: YES Disposal Location: _____

Comment: _____

Corrective Action: _____ Date: _____

Facility ID: 465162 Type: WELL API Number: 007-06337 Status: DG Insp. Status: WO

Well Drilling

Rig: Rig Name: Ensign 145 Pusher/Rig Manager: Jake Richter
 Permit Posted: Yes Access Sign: Yes

Well Control Equipment:

Pipe Ram: YES Blind Ram: YES Hydril Type: YES
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: YES Semi-Closed Loop: _____
 Multi-Well: YES Disposal Location: _____

Comment: _____

Corrective Action: _____ Date: _____

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

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: RANGELAND

Comment: _____

1002 SITE PREPARATION AND STABILIZATION

1002a. FENCING _____

Comment _____

Corrective Action _____

Date _____

1002b. SOIL REMOVAL AND
SEGREGATION _____

Comment _____

Corrective Action _____

Date _____

1002c. PROTECTION OF SOILS _____

Comment _____

Corrective Action _____

Date _____

1002E. SURFACE DISTURBANCE MINIMIZATION _____

Comment _____

Corrective Action _____

Date _____

1003a. Waste and Debris removed? **Fail** _____Comment Wooden pallet along southern slope edge of project. See photo#Corrective Action Remove all debris to comply with Interim Reclamation Rule 1003.a.Date **11/30/2019**

Unused or unneeded equipment onsite? _____

Comment _____

Corrective Action _____

Date _____

Pit, cellars, rat holes and other bores closed? _____

Comment _____

Corrective Action _____

Date _____

Guy line anchors marked? _____

Comment _____

Corrective Action _____

Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____

Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATIONCropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003e. INTERIM VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

1003 f. Weeds Noxious weeds? _____

Comment _____

Corrective Action _____ Date _____

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: RANGELAND _____

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads _____ Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

1004.d. FINAL VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation _____ Well Release on Active Location ☐ Multi-Well Location ☐

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Compaction	Pass	Culverts	Pass			
Berms	Pass	Compaction	Pass			
Gradient Terraces	Pass	Gravel	Pass			
Ditches	Pass	Ditches	Pass			

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**COGCC Comments**

Comment	User	Date
According to form 42 spud notice date was 6/21/19 for EBC 1. Scout card still showing as XX.	stewartj	09/23/2019

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

Document Num	Description	URL
687905533	EBC #1 inspection photos.	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4945568