

**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:

09/26/2019

Submitted Date:

10/06/2019

Document Number:

688305878

FIELD INSPECTION FORM

Loc ID 431885 Inspector Name: Sherman, Susan On-Site Inspection 2A Doc Num: _____

Status Summary:

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED

Operator Information:

OGCC Operator Number: 19160
Name of Operator: CONOCO PHILLIPS COMPANY
Address: 925 N ELDRIDGE PARKWAY
City: HOUSTON State: TX Zip: 77079

Findings:

- 12 Number of Comments
- 0 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
ConocoPhillips		COPColoradoReg@conocophillips.com	All Inspections
Smith, Larry		larry.r.smith@conocophillips.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
431884	WELL	PR	04/01/2018	OW	005-07203	Walker 12 1H	PR

General Comment:

[Routine Inspection](#)

[Form 4 VENT_FLARE submitted 5/7/2019, document #402033730 is In Process. Third Creek NTO was recently sent.](#)

Location

Overall Good:

Signs/Marker:			
Type	BATTERY		
Comment:			
Corrective Action:			Date:
Type	WELLHEAD		
Comment:			
Corrective Action:			Date:
Type	TANK LABELS/PLACARDS		
Comment:	NFPA diamonds are wearing off (see attached photos), maintain		
Corrective Action:			Date:
Type	OTHER		
Comment:	lease sign at gate		
Corrective Action:			Date:

Emergency Contact Number:			
Comment:	855-595-8258		
Corrective Action:			Date: _____

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:			
Type	LOCATION		
Comment:	barbed wire		
Corrective Action:			Date:
Type	PUMP JACK		
Comment:	steel pipe		
Corrective Action:			Date:

Equipment:			corrective date
Type: VRT	# 1		
Comment:			
Corrective Action:			Date:
Type: Prime Mover	# 1		
Comment:			
Corrective Action:			Date:
Type: Emission Control Device	# 2		

Comment:	one combustor, one cyclone combustor	Date:	
Corrective Action:		Date:	
Type: FWKO	# 2		
Comment:			
Corrective Action:		Date:	
Type: Flare	# 1		
Comment:			
Corrective Action:		Date:	
Type: VRU	# 1		
Comment:			
Corrective Action:		Date:	
Type: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
Type: Flow Line	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:	-7 psi, continuously monitored		
Corrective Action:		Date:	
Type: Horizontal Heater Treater	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	400 BBLs	STEEL AST		
Comment:					
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:	same metal berms as crude oil tanks			

Corrective Action:					Date:
Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	3	400 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	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:				
Date:				

Venting:

Yes/No	NO
Comment:	
Corrective Action:	
Date:	

Flaring:

Type	
Comment:	
Corrective Action:	
Date:	

Location Construction

Location ID: 431884 CDP: _____

Comment:

Corrective Action: Date: _____

Form 2A COAs:

Comment: No problems seen.

Corrective Action: Date: _____

Wildlife BMPs:

Comment:

Corrective Action: Date: _____

Comment:

Corrective Action: Date: _____

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 Facilities

Facility ID: 431884 Type: WELL API Number: 005-07203 Status: PR Insp. Status: PR

Producing Well

Comment: [PR. Jul 2019 production reported to COGCC database.](#)

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
688305968	COP Walker 12 1H	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4956173