

**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:

07/15/2020

Submitted Date:

07/21/2020

Document Number:

688308182**FIELD INSPECTION FORM**Loc ID 305047 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 10112Name of Operator: FOUNDATION ENERGY MANAGEMENT LLCAddress: 5057 KELLER SPRINGS RD STE 650City: ADDISON State: TX Zip: 75001**Status Summary:**

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

**Findings:**11 Number of Comments2 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
Young, Rob		rob.young@state.co.us	
Foundation, Energy	(866) 767-3600	regulatory@foundationenergy.com	<a href="#">All Inspections</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
277701	WELL	PR	02/08/2006	GW	125-09293	PRATHER 21-12	PR

**General Comment:**[Routine Inspection](#)[Stuffing box leak of produced water has been transported off location, contact COGCC EPS.](#)[Gas Sales Calibration is not current.](#)

## Location

Overall Good: ☒

<b>Signs/Marker:</b>			
Type	OTHER		
Comment:	lease sign at CR AA		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 866-767-3600

Corrective Action:

Date: \_\_\_\_\_

Overall Good: ☐

<b>Spills:</b>			
Type	Area	Volume	
Produced Water	WELLHEAD	<= 1 bbl	
Comment:	Stuffing box leak at wellhead (see attached photo). Contact COGCC EPS.		
Corrective Action:	Control and contain spills/releases and clean up per Rule 906.a. Immediately to stop and clean up 24 hours to remove free fluids. Thirty days to remove stained soil.		Date: 08/21/2020

In Containment: No

Comment:

☐ Multiple Spills and Releases?

<b>Fencing/:</b>			
Type	WELLHEAD		
Comment:	cattle panels around all equipment		
Corrective Action:		Date:	

<b>Equipment:</b>			corrective date
Type: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
Type: Vertical Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 1		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:	check markers in pasture		
Corrective Action:		Date:	

Type: Prime Mover	# 1		
Comment:	electric		
Corrective Action:			Date:
Type: Gas Meter Run	# 1		
Comment:	Calibration cards indicates no calibration for meter in the last year-6/2018 (see attached photo).		
Corrective Action:	Provide records as required by Rule 329. Documentation may be provided via FIRR.		Date: 08/21/2020

**Venting:**

Yes/No	NO		
Comment:			
Corrective Action:			Date:

**Flaring:**

Type		
Comment:		
Corrective Action:		Date:

### Location Construction

Location ID: 277701 CDP: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

Date: \_\_\_\_\_

#### Form 2A COAs:

**Comment:** No COAs.

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: 277701 Type: WELL API Number: 125-09293 Status: PR Insp. Status: PR**Producing Well**Comment: [PR. 5/1/2020 production reported to COGCC database.](#)

Corrective Action:

Date:

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

Document Num	Description	URL
688308234	Foundation Energy Prather 21-12	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5200920">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5200920</a>