

**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:

688308184**FIELD INSPECTION FORM**
 Loc ID 304064 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:9 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
Foundation, Energy	(866) 767-3600	regulatory@foundationenergy.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
254015	WELL	PR	05/31/2007	GW	125-07893	PRATHER 22-12	PR

General Comment:[Routine Inspection](#)[Gas Sales Calibration is not current.](#)

LocationOverall Good: ☒

Signs/Marker:			
Type	OTHER		
Comment:	lease sign at CR AA, other safety signs at well		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 866-767-3600

Corrective Action:

Date: _____

Overall Good: ☐

Spills:				
Type	Area	Volume		

In Containment: No

Comment:

☐ Multiple Spills and Releases?

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

Equipment:			corrective date
Type: Pump Jack	# 1		
Comment:	stuffing box had leak/rag		
Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment:	electric		
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:	Calibration cards indicates no calibration for meter in the last year-9/2015 (see attached photo).		
Corrective Action:	Provide records as required by Rule 329. Documentation may be provided via FIRR.	Date:	08/24/2020
Type: Vertical Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	

Type: Vertical Separator	# 0		
Comment:			
Corrective Action:		Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected FacilitiesFacility ID: 254015 Type: WELL API Number: 125-07893 Status: PR Insp. Status: PR**Producing Well**Comment: [PR. 5/1/2020 production reported to COGCC database.](#)

Corrective Action:

Date:

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

Document Num	Description	URL
402448130	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5201071
688308238	Foundation Energy Prather 22-12	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5201063