

**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:

02/02/2021

Submitted Date:

02/02/2021

Document Number:

695103938**FIELD INSPECTION FORM**Loc ID 308386 Inspector Name: Beardslee, Tom On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 10672Name of Operator: TIMBER CREEK OPERATING LLCAddress: 6295 GREENWOOD PLAZA BLVD #100City: GREENWOOD State: CO Zip: 8111-**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**8 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
Mack, Ronald		rmack@ogrisop.com	All Inspections
Fitzgerald, Edie	719-859-1394	efitzgerald@ogrisop.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
270802	WELL	PR	05/20/2004	GW	071-07957	NEW ELK 35-11	PR

General Comment:

LocationOverall Good: ☒

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Good Housekeeping:

Type	UNUSED EQUIPMENT		
Comment:	Phone 3: UNUSED EQUIPMENT (SOUND WALLS WITH NO EQUIPMENT INSIDE). Phone 4: UNUSED EQUIPMENT (UNUSED RISERS).		
Corrective Action:	COMPLY WITH RULE 606, REMOVE UNUSED EQUIPMENT.	Date:	05/02/2021

Overall Good: ☐**Spills:**

Type	Area	Volume		
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In Containment: No

Comment:

☐ Multiple Spills and Releases?**Equipment:**

corrective date

Type: Other	# 4		
Comment:	SOUND WALLS AROUND PRIME MOVER		
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:	CAL. REPORT INDICATES GAS METER HAS BEEN CALIBRATED WITHIN THE LAST YEAR.		
Corrective Action:		Date:	
Type: Progressive Cavity	# 1		
Comment:			
Corrective Action:		Date:	
Type: Other	# 4		
Comment:	SOUND WALLS NOT BEING USED		
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:	IS PLUMBED TO SURFACE		
Corrective Action:		Date:	
Type: Vertical Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 2		
Comment:			
Corrective Action:		Date:	
Type: Prime Mover	# 1		

Comment:			
Corrective Action:		Date:	
Venting:			
Yes/No	NO		
Comment:			
Corrective Action:		Date:	
Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities									
Facility ID:	270802	Type:	WELL	API Number:	071-07957	Status:	PR	Insp. Status:	PR
Idle Well									
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____									
Comment: WELL IS SHUT IN AT THE WELLHEAD.									
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

Permit:	Facility ID	Permit Num	Expiration Date
	292635	2059147	
	292635	2059147	

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

Document Num	Description	URL
695103939	INSP. PHOTOS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5343437