

**FORM  
INSP**

Rev  
X/20

**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:

02/08/2021

Submitted Date:

02/16/2021

Document Number:

700405388

**FIELD INSPECTION FORM**

Loc ID 315104 Inspector Name: Moran, Rick 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: 10654  
Name of Operator: LASSO OIL & GAS LLC  
Address: 3021 RIDGE RD #156  
City: ROCKWALL State: TX Zip: 75032

**Findings:**

- 8 Number of Comments
- 3 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
Thompson, Bud		BLThomps@BLM.gov	
Freeman, Kris	254-717-0435	kfreeman@31operating.com	
Boulger, Levin		lboulger@31operating.com	
Ikenouye, Teri		teri.ikenouye@state.co.us	
Heil, John		john.heil@state.co.us	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
230264	WELL	PR	11/08/2000	GW	103-07923	UNIVERSAL 2-19	PR

**General Comment:**

A follow up inspection of FIR documents

- 1) 700403437 dated 9-17-2020.
- 2) 700404731 dated 12-22-2020.

The following compliance issues were resolved:

- 1) Emergency phone number is functional.
- 2) Gas leak.

The following compliance issues are uncompleted:

- 1) Submit eForm 27 for pit closure. Pit is not in use and unusable. Photos 3, 4. Complete by 1-1-2021.
- 2) Report past due monthly operations on Form 7. Complete by 1-11-2021.
- 3) Calibrate gas meter. Photo 5. Complete by 2-1-2021.

This is a summary of inspection report 700405388.

**Location**

Overall Good:

<b>Signs/Marker:</b>			
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:	
Comment:	<input type="text" value="911"/>
Corrective Action:	<input type="text"/> Date: _____

Overall Good:

<b>Spills:</b>			
Type	Area	Volume	

In Containment: No  
 Comment:   
 Multiple Spills and Releases?

<b>Fencing/:</b>			
Type	PIT		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

<b>Equipment:</b>			corrective date
Type: Bradenhead	# 1		
Comment:	Bradenhead access.		
Corrective Action:		Date:	
Type: Bird Protectors	# 1		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 2		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:	Most recent meter calibration in June 2019.		
Corrective Action:	Meters need calibrated annually.	Date:	02/01/2021
Type: Horizontal Heated Separator	# 1		

Comment:			
Corrective Action:		Date:	

**Venting:**

Yes/No			
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**

Facility ID: 230264 Type: WELL API Number: 103-07923 Status: PR Insp. Status: PR

**Producing Well**

Comment: [Last reported monthly operations were for May 2020. Report past due monthly operations. Last recorded production May 2020.](#)

[Audiable gas flow in separator. Tubing pressure 50 psi. Casing gage broken.](#)

Corrective Action: [Submit required Form 7\(s\) to COGCC.](#)

Date: 01/11/2021

**Reclamation - Storm Water - Pit**

**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Berms	Fail					

Comment: Pit is filled with stormwater sediment and berm is missing. 7" of snow on location.

Corrective Action:  Date:

**Pits:**  NO SURFACE INDICATION OF PIT

Type: Blowdown Lined: NO Pit ID: Lat: Long:

Reference Point:  Other:  Length:  Width:

**Lining:**

Liner Type: Liner Condition:

Comment: Pipe going to pit is capped off. No berm present on side next to separator. Pit is currently not useable.

Corrective Action: Submit eForm 27 for pit closure. Date: 01/01/2021

**Fencing:**

Fencing Type: Wildlife Fencing Condition: Adequate

Comment:

Corrective Action:  Date:

**Netting:**

Netting Type: Netting Condition:

Comment:

Corrective Action:  Date:

Anchor Trench Present: Oil Accumulation: NO 2+ feet Freeboard:

Comment:

Corrective Action:  Date:

