

**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:
Operator Information:

OGCC Operator Number: 10654

Name of Operator: LASSO OIL & GAS LLC

Address: 3021 RIDGE RD #156

City: ROCKWALL State: TX Zip: 75032

Status Summary:

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

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.

LocationOverall Good: ☒

Signs/Marker:			
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 911

Corrective Action:

Date: _____

Overall Good: ☒

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	PIT		
Comment:			
Corrective Action:		Date:	

Equipment:			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 FacilitiesFacility 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:

Optical Gas Imaging SurveySurvey Type: RoutineCurrent Operations: ☐ Production ☐ Workover ☐ Flowback ☐ Referred to APCD

GPS(entrance of location): Lat: _____ Long: _____

Wind: Steady Speed: 15 (mph) Direction From: _____ Weather: _____ Temperature: (F)

Assisting Staff: _____ Camera #: _____

☐ Visible Smoke ☐ Referred to CDPHE

Times Surveyed

Equipment Surveyed

Time Survey Start	AM/PM	Time Survey End	AM/PM	Equipment
12:15	PM	12:20	PM	Wellhead(s)

Comment: Gas leak identified at well wheel valve on prior inspection was not detected with the FLIR camera on this inspection.

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
402600582	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5352642
700405389	inspection photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5352632