

**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:

04/07/2021

Submitted Date:

04/21/2021

Document Number:

689805632**FIELD INSPECTION FORM**Loc ID 312928 Inspector Name: Waldron, Emily On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 3975Name of Operator: ARGALI EXPLORATION COMPANYAddress: PO BOX 416City: RANGELY State: CO Zip: 81648**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**8 Number of Comments6 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
General, Contact		argaliexplorationcompany@gmail.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
222871	WELL	SI	01/01/2020	GW	081-06231	FEDERAL 1-26	SI

**General Comment:**

Routine FIU inspection. Location transferred from Mustang to Argali. Form 9 approved 10/6/2020, document number 402424253.

Corrective Actions in this report:

Signs not updated/inaccurate

Meter run not calibrated in last year

No bradenhead acces apparent

**Location**Overall Good: ☒

<b>Signs/Marker:</b>			
Type	TANK LABELS/PLACARDS		
Comment:	Sign or label not posted or information inaccurate on tanks or containers or sign/label too small to read at distance or installed in place where not visible. Tank labels should contain: name of operator, operator emergency contact number, tank capacity, tank contents, NFPA label. Signs must be updated 60 days after approval of Form 9.		
Corrective Action:	Install sign to comply with Rule 605.h.	Date:	12/06/2020
Type	BATTERY		
Comment:	Tank battery sign incomplete. Tank Battery sign must include: operator name, telephone number where operator can be reached at all times, telephone number for local emergency services (911 where available), the public road used to access the site, well name, API numbers, and legal location for all wells associated with battery, location of battery including the quarter/quarter section. Signs must be updated 60 days after approval of Form 9.		
Corrective Action:	Install sign to comply with Rule 605.e.	Date:	12/06/2020
Type	WELLHEAD		
Comment:	Sign not posted or information inaccurate at well(s). Well signs must contain: the well name, the API number, and the legal location including the quarter/quarter section. Signs must be updated 60 days after approval of Form 9.		
Corrective Action:	Install sign to comply with Rule 605.d.	Date:	12/06/2020

Emergency Contact Number:

Comment: Sign not updated to reflect current operator.

Corrective Action: Install sign to comply with Rule 605.g.

Date: 12/06/2020

Overall Good: ☒

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

In Containment: No

Comment: ☐ Multiple Spills and Releases?

<b>Equipment:</b>			corrective date
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bradenhead	#		
Comment:	No bradenhead access apparent.		
Corrective Action:	Install bradenhead access and/or means of monitoring bradenhead pressure.	Date:	05/21/2021
Type: Gas Meter Run	# 1		
Comment:	Meter not calibrated annually. Last calibrated 11/2019.		

Corrective Action:	Calibrate gas metering equipment annually to comply with rule 430.d.(1).		Date:	05/21/2021
Type: Bird Protectors	#			
Comment:				
Corrective Action:			Date:	
Type: Deadman # & Marked	# 4			
Comment:				
Corrective Action:			Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	1	300 BBLs	STEEL AST		,	
Comment:						
Corrective Action:						Date:

**Paint**

Condition	Adequate	
Other (Content)		
Other (Capacity)		
Other (Type)		

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate			Adequate
Comment:				
Corrective Action:				Date:

**Venting:**

Yes/No	NO		
Comment:			
Corrective Action:			Date:

**Flaring:**

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities									
Facility ID:	222871	Type:	WELL	API Number:	081-06231	Status:	SI	Insp. Status:	SI
Idle Well									
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned      Reminder: _____									
Comment: _____									
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: No stormwater BMPs observed. No apparent soil migration; erosion or soil movement.

Corrective Action:

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

**Pits:** ☐ NO SURFACE INDICATION OF PIT

**Attached Documents**

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

Document Num	Description	URL
402666512	INSPECTION SUBMITTED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5409397">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5409397</a>
689805633	Inspection Photo	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5409393">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5409393</a>