

**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:

06/02/2021

Submitted Date:

06/21/2021

Document Number:

689805900**FIELD INSPECTION FORM**Loc ID 312965 Inspector Name: Waldron, Emily On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 10407Name of Operator: ANTLER ENERGY LLCAddress: PO BOX 104City: BAGGS State: WY Zip: 82321**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**6 Number of Comments3 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 |
|--------------|-------|------------------------|---------|
| Evans, Clay  |       | antlerenergy@yahoo.com |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name   | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------|
| 223052      | WELL | SI     | 11/01/2019  | GW         | 081-06414 | USA AMOCO A-A 1 | SI          |

**General Comment:**

Routine FIU inspection. Compliance issues observed:  
 trash on location and migrating off location  
 no bradenhead access apparent

**Location**Overall Good: ☒

|                      |                      |       |  |
|----------------------|----------------------|-------|--|
| <b>Signs/Marker:</b> |                      |       |  |
| Type                 | TANK LABELS/PLACARDS |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |
| Type                 | WELLHEAD             |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |
| Type                 | BATTERY              |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |

Emergency Contact Number:

Comment: 307-380-7616

Corrective Action:

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

**Good Housekeeping:**

|                    |   |       |            |
|--------------------|---|-------|------------|
| Type               | DEBRIS                                  |       |            |
| Comment:           | Tank insulation migrating off location. |       |            |
| Corrective Action: | Comply with Rule 606.                   | Date: | 06/28/2021 |

Overall Good: ☐**Spills:**

|      |      |        |  |  |
|------|------|--------|--|--|
| Type | Area | Volume |  |  |
|------|------|--------|--|--|

In Containment: No

Comment:

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

|                                   |   |       |                 |
|-----------------------------------|---|-------|-----------------|
|                                   |   |       | corrective date |
| Type: Horizontal Heated Separator | # 2   |       |                 |
| Comment:                          |   |       |                 |
| Corrective Action:                |   | Date: |                 |
| Type: Bradenhead                  | #   |       |                 |
| Comment:                          | No bradenhead access apparent.  |       |                 |
| Corrective Action:                | Install bradenhead access and/or means of monitoring bradenhead pressure. | Date: | 07/21/2021      |
| Type: Gas Meter Run               | # 1   |       |                 |
| Comment:                          | Meter not calibrated annually. Meter last calibrated 4/2019.              |       |                 |
| Corrective Action:                | Calibrate gas metering equipment annually to comply with rule 430.d.(1).  | Date: | 07/21/2021      |
| Type: Bird Protectors             | #   |       |                 |
| Comment:                          |   |       |                 |
| Corrective Action:                |   | Date: |                 |

|                                 |     |       |
|---------------------------------|-----|-------|
| Type: Horizontal Heater Treater | # 1 |       |
| Comment:                        |     |       |
| Corrective Action:              |     | Date: |

**Tanks and Berms:**

|                    |   |          |           |         |        |
|--------------------|---|----------|-----------|---------|--------|
| Contents           | # | Capacity | Type      | Tank ID | SE GPS |
| CRUDE OIL          | 2 | 400 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: 223052 Type: WELL API Number: 081-06414 Status: SI Insp. Status: SI

**Idle Well**

Purpose: ☒ Shut In ☐ 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   |
|--------------|----------------------|---|
| 402726804    | INSPECTION SUBMITTED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5461676">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5461676</a> |
| 689805901    | Inspection Photos    | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5461670">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5461670</a> |