

**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:

11/04/2021

Submitted Date:

11/07/2021

Document Number:

688311512

FIELD INSPECTION FORM

Loc ID 317040 Inspector Name: Sherman, Susan 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: 95620
Name of Operator: WESTERN OPERATING COMPANY
Address: 1165 DELAWARE STREET #200
City: DENVER State: CO Zip: 80204

Findings:

- 14 Number of Comments
- 1 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
Crumley, Tim	(970) 768-5659	Roiytcrumley@tcrumleypumpingservice.com	
James, Steve	(303) 893-2438	steve@westernoperating.com	President

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
234850	WELL	PR	08/01/2014	OW	121-06991	G O YEAMANS 1	PR

General Comment:

Routine Field Inspection

Free oil on pit (see attached photos). Inspector contacted pumper who will get it cleaned right away. Check for animal holes in tank berms (south side).

Location

Overall Good:

Signs/Marker:

Type	OTHER		
Comment:	lease sign at CR		
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	CONTAINERS		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 303-893-2438

Corrective Action:

Date: _____

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment: _____

Multiple Spills and Releases?

Equipment:

Type			corrective date
Type: Vertical Heater Treater	# 1		
Comment:	shed, bermed, propane		
Corrective Action:		Date:	
Type: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment:	propane		
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			

Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:	2021 Form 17 is in COGCC database.		
Corrective Action:		Date:	
Type: Bird Protectors	# 5		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	200 BBLs	FIBERGLASS AST		,
Comment:					
Corrective Action:					Date:

Paint

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

Berms

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

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	2	300 BBLs	STEEL AST		,
Comment:	one tank is heated				
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate			
Comment:	check for animal holes			
Corrective Action:				Date:

Wells Served By Facilities Above

API Number
121-06991

AirsID

API Number	AirsID
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Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Location Construction

Location ID: 234850 CDP: _____

Comment: _____

Corrective Action: _____ Date: _____

Form 2A COAs:

Comment: No COAs.

Corrective Action: _____ Date: _____

Wildlife BMPs:

Comment: _____

Corrective Action: _____ Date: _____

Comment: _____

Corrective Action: _____ **Date:** _____

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____

Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____

Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Inspected Facilities

Facility ID: 234850 Type: WELL API Number: 121-06991 Status: PR Insp. Status: PR

Producing Well

Comment: pr

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
Ditches	Pass					
Compaction	Pass	Compaction	Pass	Material Handling And Spill Prevention	Pass	
Gravel	Pass	Gravel	Pass			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

Type: Produced Water Lined: NO Pit ID: Lat: Long:

Reference Point: _____ Other: _____ Length: _____ Width: _____

Lining:

Liner Type: Liner Condition:

Comment:

Corrective Date: _____

Fencing:

Fencing Type: None Fencing Condition:

Comment:

Corrective Date: _____

Netting:

Netting Type: Netting Condition:

Comment:

Corrective Date: _____

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

Comment:

Corrective Date: _____

Type: Produced Water Lined: NO Pit ID: Lat: Long:

Reference Point: _____ Other: _____ Length: _____ Width: _____

Lining:

Liner Type: Liner Condition:

Comment:

Corrective Date: _____

Fencing:

Fencing Type: None Fencing Condition:

Comment:

Corrective Date: _____

Netting:

Netting Type:	Netting Condition:	
Comment:	<input style="width:100%;" type="text"/>	
Corrective		Date:
Anchor Trench Present:	Oil Accumulation: <u>NO</u>	2+ feet Freeboard: <u>YES</u>
Comment:	<input style="width:100%;" type="text" value="dry"/>	
Corrective		Date:
Type: <u>Produced Water</u>	Lined: <u>NO</u>	Pit ID: Lat: Long:
Reference Point: _____	Other: _____	Length: _____ Width: _____
<u>Lining:</u>		
Liner Type:	Liner Condition:	
Comment:	<input style="width:100%;" type="text"/>	
Corrective		Date:
<u>Fencing:</u>		
Fencing Type: <u>None</u>	Fencing Condition:	
Comment:	<input style="width:100%;" type="text" value="crop field"/>	
Corrective Action		Date:
<u>Netting:</u>		
Netting Type:	Netting Condition:	
Comment:	<input style="width:100%;" type="text"/>	
Corrective Action		Date:
Anchor Trench Present:	Oil Accumulation: <u>YES</u>	2+ feet Freeboard: <u>YES</u>
Comment:	<input style="width:100%;" type="text" value="Free oil on first pit."/>	
Corrective Action	<input style="width:100%;" type="text" value="Remove oil from pit per Rule 909.e."/>	Date: <u>11/08/2021</u>

Attached Documents

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

Document Num	Description	URL
402863927	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5574156
688311524	Western Operating G O Yeamans 1	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5574153