

**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:

11/08/2021

Submitted Date:

11/13/2021

Document Number:

688311540

FIELD INSPECTION FORM

Loc ID 387183 Inspector Name: Sherman, Susan On-Site Inspection 2A Doc Num: _____

Operator Information:

OGCC Operator Number: 10634
Name of Operator: P O & G OPERATING LLC
Address: 5847 SAN FELIPE SUITE 3200
City: HOUSTON State: TX Zip: 77057

Status Summary:

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

Findings:

- 11 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
Nash, Charlotte	281.543.3606	charlotte_nash@pogresource.com	Production and Regulatory
Shalberg, Greg	(719) 688-3547	gregshalberg@aol.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
260527	WELL	PR	05/06/2015	DA	073-06299	State Dole 1-36	PR

General Comment:

Reinspection, sign maintained, FIRR submitted and approved
Check stuffing box, thief hatch and gas engine for leaks.

Location

Overall Good:

Signs/Marker:

Type	CONTAINERS		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:

Corrective Action:

Date:

Good Housekeeping:

Type	OTHER		
Comment:	Engine oil leaking on ground (see attached photo).		
Corrective Action:	Non E&P Waste not properly stored, handled, transported, treated, or disposed per Rule 906. Requires appropriate cleanup.	Date:	11/16/2021

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:

Type	LOCATION		
Comment:			
Corrective Action:		Date:	

Equipment:

Type: FWKO	# 1		corrective date
Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 3		
Comment:			

Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment:	gas engine, leaking		
Corrective Action:		Date:	
Type: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:	2021 Form 17 is in the COGCC database.		
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Emission Control Device	# 1		
Comment:	not on, no gas produced, propane		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	400 BBLs	FIBERGLASS AST		,
Comment:					
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:	same metal berms as crude oil tanks			
Corrective Action:				Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	2	400 BBLs	FIBERGLASS AST		,
Comment:	Clean oil that leaked from thief hatch (see attached photos).				
Corrective Action:					Date:

Paint

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

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

Wells Served By Facilities Above

AirsID

API Number
073-06299

API Number	AirsID
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Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type		
Comment:		
Corrective Action:		Date:

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Location Construction

Location ID: 260527 CDP: _____

Comment:

Corrective Action:

Date: _____

Form 2A COAs:

Comment: No problems seen.

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: 260527 Type: WELL API Number: 073-06299 Status: PR Insp. Status: PR

Producing Well

Comment: [pr 8/1/2021 production reported to COGCC database. No gas.](#)

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

Comment:

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
402870135	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5580415
688311567	P O & G Operating State Dole 1-36	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5580402