

**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:

02/25/2022

Submitted Date:

02/25/2022

Document Number:

695105723

FIELD INSPECTION FORM

Loc ID 308820 Inspector Name: Beardslee, Tom On-Site Inspection 2A Doc Num: _____

Operator Information:

OGCC Operator Number: 10758
Name of Operator: OGRIS OPERATING LLC
Address: PO BOX 53467
City: MIDLAND State: TX Zip: 79710

Status Summary:

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

Findings:

- 7 Number of Comments
- 2 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
GEE, GREG	903-987-0353	ggee@ogrisop.com	All Inspections
WARD, GIENA		gward@ogrisop.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
282647	WELL	PR	07/04/2006	GW	071-08686	APACHE CANYON 23-16	PR

General Comment:

Location

Overall Good:

Signs/Marker:			
Type	OTHER		
Comment:	PHOTO 2: WELL SIGN/ SECTION NUMBER IS FADED AND CANT SEE SECTION 23.		
Corrective Action:	COMPLY WITH RULE 605. POST SIGN WITH ALL REQUIRED INFORMATION (SINCE THIS SIGN HAS TO BE REPAIRED INCLUDE THE API NUMBER.	Date:	03/25/2022

Emergency Contact Number:		
Comment:	<input type="text"/>	
Corrective Action:	<input type="text"/>	Date: <input type="text"/>

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:			corrective date
Type: Vertical Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:	IS ACCESSABLE		
Corrective Action:		Date:	
Type: Ancillary equipment	# 1		
Comment:			
Corrective Action:		Date:	
Type: Compressor	# 1		
Comment:	PHOTO 4: MUFFLER ON COMPRESSOR SKID IS BROKE IN HALF. REPLACE MUFFLER.		
Corrective Action:	inspect and repair at regular intervals and maintain in good mechanical condition per Rule 608.e.	Date:	03/03/2022
Type: Gas Meter Run	# 1		
Comment:	CAL. REPORT INDICATES GAS METER HAS BEEN CALIBRATED WITHIN THE LAST YEAR.		
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment:			

Corrective Action:		Date:	
Type: Progressive Cavity	# 1		
Comment:			
Corrective Action:		Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			
Corrective Action:		Date:	

