



**Location**

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

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

Overall Good:

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

In Containment: No

Comment:

Multiple Spills and Releases?

| <b>Equipment:</b>         |                                                                           |  | corrective date |
|---------------------------|---------------------------------------------------------------------------|--|-----------------|
| Type: Vertical Separator  | # 1                                                                       |  |                 |
| Comment:                  |                                                                           |  |                 |
| Corrective Action:        |                                                                           |  | Date:           |
| Type: Progressive Cavity  | # 1                                                                       |  |                 |
| Comment:                  |                                                                           |  |                 |
| Corrective Action:        |                                                                           |  | Date:           |
| Type: Bradenhead          | # 2                                                                       |  |                 |
| Comment:                  | IS ACCESSABLE                                                             |  |                 |
| Corrective Action:        |                                                                           |  | Date:           |
| Type: Gas Meter Run       | # 1                                                                       |  |                 |
| Comment:                  | CAL. REPORT INDICATES GAS METER HAS BEEN CALIBRATED WITHIN THE LAST YEAR. |  |                 |
| Corrective Action:        |                                                                           |  | Date:           |
| Type: Ancillary equipment | # 1                                                                       |  |                 |
| Comment:                  |                                                                           |  |                 |
| Corrective Action:        |                                                                           |  | Date:           |
| Type: Deadman # & Marked  | # 4                                                                       |  |                 |
| Comment:                  |                                                                           |  |                 |
| Corrective Action:        |                                                                           |  | Date:           |
| Type: Prime Mover         | # 1                                                                       |  |                 |
| Comment:                  | SEE STORM WATER SECTION FOR CORRECTIVE ACTION                             |  |                 |
| Corrective Action:        |                                                                           |  | Date:           |

**Venting:**

Yes/No NO

Comment:

Corrective Action:

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

**Flaring:**

|                    |  |       |
|--------------------|--|-------|
| Type               |  |       |
| Comment:           |  |       |
| Corrective Action: |  | Date: |

**Inspected Facilities**

Facility ID: 262233 Type: WELL API Number: 071-07546 Status: PR Insp. Status: PR

**Producing Well**

Comment:

Corrective Action:

Date:

**BradenHead**

Date of Last Brhd Test: 10/15/2015 Annual Brhd Completed? \_\_\_\_\_

Last Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: \_\_\_\_\_

End Surf Csg Pressure: 0

Comment: APPROVED FORM 4 IS ON FILE DOC #400948660

Corrective Action:

Date:

Facility ID: 264454 Type: PIT API Number: - Status: AC Insp. Status: AC

**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: PHOTO 4 & 5: CORRECTIVE ACTION FROM PREVIOUS INSPECTION HAS NOT BEEN ADDRESSED. OILY WASTE IN PRIME MOVER ENGINE SKID.

Corrective Action: COMPLY WITH RULE 1002.f.(2)B REMOVE OIL IN SKID WITHIN 24 HOURS, 1002.2(d). REPAIR LEAKS IN EQUIPENT 5 DAYS TO REPAIR EQUIPMENT LEAKS, Comply with general provisions of the oil and gas act for wildlife protection AND SB-181. IMMEDIATE ACTION IS REQUIRED.

Date: 05/02/2022

**Pits:**  NO SURFACE INDICATION OF PIT

Type: Produced Water      Lined: NO      Pit ID: 264454      Lat: 37.141321      Long: -104.815488

Reference Point: \_\_\_\_\_ Other: \_\_\_\_\_ Length: \_\_\_\_\_ Width: \_\_\_\_\_

**Lining:**

Liner Type: \_\_\_\_\_ Liner Condition: \_\_\_\_\_

Comment: \_\_\_\_\_  
 Corrective \_\_\_\_\_

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

**Fencing:**

Fencing Type: \_\_\_\_\_ Fencing Condition: Adequate

Comment: \_\_\_\_\_  
 Corrective \_\_\_\_\_

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

**Netting:**

Netting Type: \_\_\_\_\_ Netting Condition: \_\_\_\_\_

Comment: NONE  
 Corrective \_\_\_\_\_

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

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

Comment: \_\_\_\_\_  
 Corrective \_\_\_\_\_

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

| Permit: | Facility ID | Permit Num | Expiration Date |
|---------|-------------|------------|-----------------|
|         | 270534      | 1126309    |                 |
|         | 264454      | 1120790    |                 |

**COGCC Comments**

| Comment                                                                                                                                                    | User     | Date       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------|
| THIS IS A FOLLOW UP TO INSP. DOC. #695105760, CA HAS NOT BEEN ADDRESSED. THIS IS A SECOND NOTICE FOR THIS CORRECTIVE ACTION. IMMEDIATE ACTION IS REQUIRED. | beardslt | 05/02/2022 |