

FORM
INSPRev
X/20State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Inspection Date:

05/10/2022

Submitted Date:

05/10/2022

Document Number:

695106270

FIELD INSPECTION FORM

 Loc ID 308053 Inspector Name: Beardslee, Tom On-Site Inspection 2A Doc Num:
Status Summary:

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

Findings:

5 Number of Comments

0 Number of Corrective Actions

 Corrective Action Response Requested

**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE**

Operator Information:

OGCC Operator Number: 10705

Name of Operator: EVERGREEN NATURAL RESOURCES LLC

Address: 1875 LAWRENCE ST STE 1150

City: DENVER State: CO Zip: 80202

Contact Information:

Contact Name	Phone	Email	Comment
Morgan, John		john.morgan@state.co.us	
Distribution, Evergreen	719-846-7898	cogcc.evergreen@enrllc.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
159094	UIC DISPOSAL	AC	05/08/2003		-	HILL RANCH 14-12 WD	AC
260558	WELL	IJ	04/11/2022	DSPW	071-07455	HILL RANCH DEEP 14-12 WD	IJ
263095	PIT	AC	03/27/2002		-	HILL RANCH DEEP 14-12 ONSITE	AC

General Comment:

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good:

Spills:

Type	Area	Volume			

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

Type	#	Comment	Corrective Action	Date	corrective date
Bradenhead	# 1	IS ACCESSABLE			
Ancillary equipment	# 1				
Deadman # & Marked	# 4				

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	2	1000 BBLS	FIBERGLASS AST		37.092703,-104.736059
Comment:	<input type="text"/>				
Corrective Action:	<input type="text"/>				Date:

Paint

Condition	Adequate	<input type="text"/>
Other (Content)	<input type="text"/>	
Other (Capacity)	<input type="text"/>	
Other (Type)	<input type="text"/>	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:	<input type="text"/>			
Corrective Action:	<input type="text"/>			Date:

Venting:

Yes/No	NO	<input type="text"/>
Comment:	<input type="text"/>	

Corrective Action:		Date:	
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Flaring:

Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 159094 Type: UIC API Number: - Status: AC Insp. Status: AC

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: 381

UIC Routine

Inj./Tube: Pressure or inches of Hg -24 Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: _____
 TC: Pressure or inches of Hg 0 Previous Test Pressure _____ Last MIT: _____
 Brhd: Pressure or inches of Hg 0 Previous Test Pressure _____ AnnMTReq: NO

Comment: TBG/CSG ANNULUS PRESSURE 0 HAD A SLIGHT BLOW FOR APP. 3 SECONDS AND BLEW DOWN. BRADENHEAD PRESSURE 0 HAD SLIGHT BLOW, BLEW DOWN IN APP. 6 SECONDS. MONITORED FOR 15 MIN. NO BLOW NO FLUID.

Corrective Action: _____ Date: _____

Method of Injection: GRAVITY FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

BradenHead

Date of Last Brhd Test: _____ Annual Brhd Completed? _____

Last Brhd Test Results Initial Surf Csg Pressure: _____ Fluid Type: _____
 End Surf Csg Pressure: _____

Comment: FORM 4 DOC #400964183

Corrective Action: _____ Date: _____

Facility ID: 260558 Type: WELL API Number: 071-07455 Status: IJ Insp. Status: IJ

Facility ID: 263095 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
Compaction	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

Type: Produced Water Lined: NO Pit ID: 263095 Lat: 37.093714 Long: -104.737555

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

Lining:

Liner Type: _____ Liner Condition: _____

Comment:

Corrective Action

Date: _____

Fencing:

Fencing Type: _____ Fencing Condition: Adequate

Comment:

Corrective Action

Date: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: NONE

Corrective Action

Date: _____

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

Comment:

Corrective Action

Date: _____

Attached Documents

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

Document Num	Description	URL
695106271	INSP. PHOTOS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5749775