

**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:

11/28/2023

Submitted Date:

12/01/2023

Document Number:

700300679

FIELD INSPECTION FORMLoc ID 320864 Inspector Name: LABOWSKIE, STEVE On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**

OGCC Operator Number: 900

Name of Operator: ALAMOSA DRILLING INC

Address: 8150 N. CENTRAL EXPY - STE 750

City: DALLAS State: TX Zip: 75205-

Status Summary:

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

Findings:

6 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
Longworth, Mike		michael.longworth@state.co.us	
Moore, Todd	(214) 368-6700/ (719)342-1445	kiowagas@sbcglobal.net	Owner

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
205262	WELL	SI	12/01/2022	OW	007-06141	NIELSEN 5	SI

General Comment:

SW Compliance supervisor at site to witness pressure check/blowdown of bradenehad prior to scheduled redo of annual bradenhead test.

Supervisor asked about extra flowline observed at wellhead and oprator indicated that it belonged to landowner who periodically used the casing gas to supplement gas from Martinez 1 well. Only Martinez 1 has a domestic tap and off location flowline registered. See equipment section for corrective action.

LocationOverall Good: ☐**Signs/Marker:**

Type	OTHER		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:		
Corrective Action:		Date: _____

Good Housekeeping:

Type	WEEDS		
Comment:	Dead dry combustible weed/vegetation near pumping unit/wellhead		
Corrective Action:	Remove combustible materials and keep area within 25' of wellhead and tanks per rule 610.k	Date:	12/08/2023

Overall Good: ☐**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Equipment:**

Type: Other	# 1		corrective date
Comment:	wellhead		
Corrective Action:		Date:	
Type: Flow Line	# 1		
Comment:			
Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment:			
Corrective Action:		Date:	
Type: Flow Line	# 1		
Comment:	2" that operator indicated he did not operate and that it is periodically used to supply domestic tap along with Martinez 1 well. Only Martinez 1 has a domestic tap/off location flowline registration		
Corrective Action:	Register domestic tap/off location flowline per Rule 1101	Date:	12/07/2023

Type: Pump Jack	# 1	
Comment:		
Corrective Action:		Date:
Type: Bradenhead	# 1	
Comment:		
Corrective Action:		Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	1	300 BBLs	STEEL AST		,
Comment:					
Corrective Action:					Date:

Paint

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

Berms

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

Venting:

Yes/No	NO	
Comment:		
Corrective Action:		Date:

Flaring:

Type	
Comment:	
Corrective Action:	Date:

Inspected Facilities									
Facility ID:	205262	Type:	WELL	API Number:	007-06141	Status:	SI	Insp. Status:	SI
BradenHead									
Date of Last Brhd Test:		04/25/2023		Annual Brhd Completed?		Yes			
Last Brhd Test Results		Initial Surf Csg Pressure:		0		Fluid Type: NONE			
		End Surf Csg Pressure:		0					
Comment:		<div>Opened brsadenhead for pre-test blowdown. No fluid or pressure</div>							
Corrective Action:		<div></div>					Date:		

Optical Gas Imaging Survey

Survey Type: _____

Current Operations: ☐ Production ☐ Workover ☐ Flowback ☐ Referred to APCD

GPS(entrance of location): Lat: _____ Long: _____

Wind: _____ Speed: _____ (mph) Direction From: _____ Weather: _____ Temperature: (F) _____

Assisting Staff: _____ Camera #: _____

☐ Visible Smoke ☐ Referred to CDPHE

Comment: _____

Corrective Action: _____ Date: _____

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

Document Num	Description	URL
700300680	combustible material within 25' of wellhead	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6340271
700300681	unregistered off location flowline (domestic)	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6340272