

**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:

10/31/2024

Submitted Date:

11/05/2024

Document Number:

693807894**FIELD INSPECTION FORM**Loc ID 322507 Inspector Name: BROWNING, CHUCK On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**ECMC Operator Number: 51130Name of Operator: LOCIN OIL CORPORATIONAddress: 600 TRAVIS STREET SUITE 5050City: HOUSTON State: TX Zip: 77002**Status Summary:**

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

Findings:9 Number of Comments1 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 |
|------------------|--------------|-----------------------------|---------------------------------|
| Gross, Jason | | jgross@blm.gov | Silt |
| Lapham, Ken | 979-877-4951 | klapham@locin.energy | All Inspections |
| Browning, Chuck | 970-433-4139 | chuck.browning@state.co.us | Field Inspector |
| Labowskie, Steve | | steve.labowskie@state.co.us | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|
| 210655 | WELL | TA | 08/01/2023 | GW | 045-06411 | FULLER USA 18-12 | TA |

General Comment:[ECMC staff performed a routine field inspection on 10/31/2024.](#)[Issues were found requiring corrective action. See inspection text and photos for details.](#)[Any Corrective Actions from previous inspections that have not been addressed are still applicable](#)

Location**Lease Road:**

| | | | |
|-------------------|--------|-------|--|
| Type | Access | | |
| comment: | | | |
| Corrective Action | | Date: | |
| Type | Main | | |
| comment: | | | |
| Corrective Action | | Date: | |

Overall Good: ☒**Signs/Marker:**

| | | | |
|--------------------|----------------------|-------|--|
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

Comment: 970-858-7546

Corrective Action:

Date: _____

Overall Good: ☒**Spills:**

| Type | Area | Volume | | |
|------|------|--------|--|--|
|------|------|--------|--|--|

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Fencing/:**

| | | | |
|--------------------|------------|-------|--|
| Type | WELLHEAD | | |
| Comment: | Pipe fence | | |
| Corrective Action: | | Date: | |

Equipment:

| | | | |
|-----------------------|-----|-------|-----------------|
| | | | corrective date |
| Type: Bird Protectors | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Bradenhead | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Dehydrator | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

| | | |
|-----------------------------------|-----|-------|
| Type: Deadman # & Marked | # 4 | |
| Comment: | | |
| Corrective Action: | | Date: |
| Type: Horizontal Heated Separator | # 1 | |
| Comment: | | |
| Corrective Action: | | Date: |

Tanks and Berms:

| | | | | | |
|--------------------|---|----------|-----------|---------|-----------------------|
| Contents | # | Capacity | Type | Tank ID | SE GPS |
| PRODUCED WATER | 1 | 100 BBLS | STEEL AST | | 39.453299,-109.038729 |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |

Paint

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

Berms

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

| | | | | | |
|--------------------|---------------|-----------|-----------|---------|-----------------------|
| Contents | # | Capacity | Type | Tank ID | SE GPS |
| PRODUCED WATER | 1 | <100 BBLS | PBV STEEL | | 39.452969,-109.039096 |
| Comment: | Blowdown tank | | | | |
| Corrective Action: | | | | | Date: |

Paint

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

Berms

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

Venting:

| | | |
|--------------------|-------|--|
| Yes/No | NO | |
| Comment: | | |
| Corrective Action: | Date: | |

Flaring:

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

| Inspected Facilities | | | | | | | | | |
|-------------------------|--------|--|------|---|-----------|-------------|----|---------------|----|
| Facility ID: | 210655 | Type: | WELL | API Number: | 045-06411 | Status: | TA | Insp. Status: | TA |
| Idle Well | | | | | | | | | |
| Purpose: | | <input type="checkbox"/> Shut In | | <input checked="" type="checkbox"/> Temporarily Abandoned | | Reminder: | | | |
| Comment: | | Defined Inactive 05/31/2020 | | | | | | | |
| Corrective Action: | | | | | | | | Date: | |
| BradenHead | | | | | | | | | |
| Date of Last Brhd Test: | | 06/15/2022 | | Annual Brhd Completed? | | No | | | |
| Last Brhd Test Results | | Initial Surf Csg Pressure: | | 628 | | Fluid Type: | | NONE | |
| | | End Surf Csg Pressure: | | 0 | | | | | |
| Comment: | | No annual bradenhead test Form 17 on file. | | | | | | 12/05/2024 | |
| Corrective Action: | | Submit Form 17 as directed by Rule 419.c | | | | | | Date: | |

The subreport 'InspWellFlowline' could not be found at the specified location \\10.14.12

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 | | | |

Comment:

Corrective Action:

Date:

Pits: ☐ NO SURFACE INDICATION OF PIT

Attached Documents

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

| | | |
|--------------|------------------------------|---|
| Document Num | Description | URL |
| 693807895 | Inspection photos 10/31/2024 | https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=6774534 |