

**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:

02/07/2025

Submitted Date:

02/11/2025

Document Number:

697505793

FIELD INSPECTION FORM

Loc ID 309984 Inspector Name: Binschus, Chris On-Site Inspection 2A Doc Num: _____

Status Summary:

THIS IS A FOLLOW UP INSPECTION

FOLLOW UP INSPECTION REQUIRED

NO FOLLOW UP INSPECTION REQUIRED

Findings:

4 Number of Comments

1 Number of Corrective Actions

Corrective Action Response Requested

Operator Information:

ECMC Operator Number: 10373

Name of Operator: NGL WATER SOLUTIONS DJ LLC

Address: 865 NORTH ALBION ST., STE 400

City: DENVER State: CO Zip: 80220

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

Contact Information:

Contact Name	Phone	Email	Comment
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Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
159219	UIC DISPOSAL	CL	08/07/2015	DSPW	-	SYNERGY 15-18 I	RI
295196	WELL	PA	08/07/2015	DSPW	123-25694	Synergy Disposal 15-18 I	RI

General Comment:

This is a Final Reclamation and Stormwater Inspection for PA DSPW well 123-25694 for Location ID 309984 that was plugged and abandoned on 8/17/2015.

This location has two Location ID's (309984 and 443273) both of which have an Active status. A separate field inspection report will be submitted for Location ID 443273.

Inspected Facilities

Facility ID: 159219 Type: UIC API Number: - Status: CL Insp. Status: RI

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

Facility ID: 295196 Type: WELL API Number: 123-25694 Status: PA Insp. Status: RI

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

Environmental

Spills/Releases:

Type of Spill: _____ Estimated Spill Volume: _____

Comment: Operator shall close the northern facility illustrated in Photo #2 in accordance with an approved Form 27 per Rule 911.

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well Complaint:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

Field Parameters:

Sample Location: _____ Comment: _____

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: RANGELAND

Comment: _____

1002 SITE PREPARATION AND STABILIZATION

1002a. FENCING _____

Comment _____

Corrective Action _____

Date _____

1002b. SOIL REMOVAL AND SEGREGATION _____

Comment _____

Corrective Action _____

Date _____

1002c. PROTECTION OF SOILS _____

Comment _____

Corrective Action _____

Date _____

1002E. SURFACE DISTURBANCE MINIMIZATION _____

Comment _____

Corrective Action _____

Date _____

1003a. Waste and Debris removed? _____

Comment _____

Corrective Action _____

Date _____

Unused or unneeded equipment onsite? _____

Comment _____

Corrective Action _____

Date _____

Pit, cellars, rat holes and other bores closed? _____

Comment _____

Corrective Action _____

Date _____

Guy line anchors marked? _____

Comment _____

Corrective Action _____

Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____

Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003e. INTERIM VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

1003 f. Weeds Noxious weeds? _____

Comment

Corrective Action

Date _____

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: RANGELAND _____

Reminder: _____

Comment:

Well plugged Pass Pit mouse/rat holes, cellars backfilled _____

Debris removed **Fail** No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed **Fail** Locations, facilities, roads, recontoured **Fail**

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% **Fail** Cropland: perennial forage _____

Weeds present _____ Subsidence _____

1004.d. FINAL VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

Comment:

	<p>The northern facility is no longer in use and was part of operations for the DSPW well 123-25694 that was PA'ed on 8/17/2015. Operator installed a Produced Water Transfer System between the C7 location (Location ID 419255) and this Apollo location. The Produced Water Transfer System in-service date started on 12/20/2015 and replaced the need for the northern facility.</p> <p>Operator has failed to remove all surface equipment within three months of plugging the DSPW well 123-25694 and failed to perform final reclamation per Rule 1004.a.</p>	
Corrective Action:	<p style="color: red;">Comply with Rule 1004.a. regarding the removal of all surface equipment and final reclamation regarding the northern facility.</p> <p style="color: red;">There is no corrective action date due to this being out of compliance. Final reclamation activities shall be complete as soon as environmental conditions will permit.</p>	Date _____
<p>Overall Final Reclamation Fail Well Release on Active Location <input type="checkbox"/> Multi-Well Location <input type="checkbox"/></p>		

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
<p>Comment: At the time of this inspection, no stormwater erosion issues were observed at location or along the access road.</p>						
Corrective Action: _____						Date: _____
<p>Pits: <input type="checkbox"/> NO SURFACE INDICATION OF PIT</p>						

Attached Documents

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

Document Num	Description	URL
404089906	INSPECTION SUBMITTED	https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=6914518
697505795	Inspection Photos	https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=6914517