

**FORM
INSP**Rev
05/11**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:

05/31/2016

Document Number:

675202880

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	334520	334520	CONKLIN, CURTIS	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10433Name of Operator: LARAMIE ENERGY LLCAddress: 1401 SEVENTEENTH STREET #1400City: DENVER State: CO Zip: 80202

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED
- ☐ INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

Contact Name	Phone	Email	Comment
Bankert, Wayne	(970) 683-5419	wbankert@laramie-energy.com	Senior Regulatory & Environmental Coordinator

Compliance Summary:QtrQtr: NWNW Sec: 10 Twp: 10S Range: 94W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/25/2016	675202440			SATISFACTORY			No
02/10/2015	675201186			SATISFACTORY			No
08/13/2014	675200399			SATISFACTORY			No

Inspector Comment:

Inspection in response to Flash Flood incident. Access is limited due to Salt Creek Road maintenace by county. No damage to location or wells.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
159780	SPILL OR RELEASE	CL	01/17/2015		-	SPILL/RELEASE POINT	CL	<input type="checkbox"/>
291422	WELL	PA	02/13/2013	GW	077-09333	HAWKINS RANCH 10-2	PA	<input type="checkbox"/>
291438	WELL	PR	02/17/2015	GW	077-09339	HAWKINS RANCH 10-3	SI	<input checked="" type="checkbox"/>
291441	WELL	PR	01/29/2016	GW	077-09338	HAWKINS RANCH 3-13	SI	<input checked="" type="checkbox"/>
291442	WELL	PR	08/31/2011	GW	077-09337	HAWKINS RANCH 10-4	SI	<input checked="" type="checkbox"/>
295761	WELL	PR	03/07/2010	GW	077-09626	HAWKINS RANCH 10-2B	SI	<input checked="" type="checkbox"/>
295762	WELL	PR	10/14/2013	GW	077-09625	HAWKINS RANCH 10-4A	SI	<input checked="" type="checkbox"/>
295763	WELL	PR	02/16/2010	GW	077-09624	HAWKINS RANCH 10-3C	SI	<input checked="" type="checkbox"/>

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295764	WELL	PR	03/01/2010	GW	077-09623	HAWKINS RANCH 10-3B	SI	X
295765	WELL	PR	08/01/2014	GW	077-09622	HAWKINS RANCH 10-2C	SI	X
295766	WELL	PR	12/14/2009	GW	077-09621	HAWKINS RANCH 10-3A	SI	X
295767	WELL	PR	12/18/2009	GW	077-09620	HAWKINS RANCH 10-2A	SI	X
295768	WELL	PR	03/06/2010	GW	077-09619	HAWKINS RANCH 3-13C	SI	X
295769	WELL	PR	11/04/2013	GW	077-09618	HAWKINS RANCH 3-13B	SI	X
295770	WELL	PR	02/09/2016	GW	077-09617	HAWKINS RANCH 3-13A	SI	X
297455	WELL	PR	02/04/2010	GW	077-09693	HAWKINS RANCH 10-4B	SI	X
297456	WELL	PR	02/15/2010	OW	077-09694	HAWKINS RANCH 10-4C	SI	X
414313	PIT	CL	12/09/2011		-	HAWKINS RANCH 10-4 PAD	CL	

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location**Lease Road:**

Type	Satisfactory/Action Required	comment	Corrective Action	Date
Access	SATISFACTORY			

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Spills:

Type	Area	Volume	Corrective action	CA Date

Inspector Name: CONKLIN, CURTIS

☐ Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Equipment:

Type:	#	Satisfactory/Action Required:	
Comment			
Corrective Action			Date:

Facilities:

☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
METHANOL	1	<50 BBLS	STEEL AST	,
S/AR	SATISFACTORY	Comment:		
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				

Facilities:

☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	300 BBLS	STEEL AST	,
S/AR	SATISFACTORY	Comment:		
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				

Facilities:

☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS

Inspector Name: CONKLIN, CURTIS

CONDENSATE	5	300 BBLs	STEEL AST		
S/AR	SATISFACTORY	Comment: AIRS ID 077-0476-003			
Corrective Action:					Corrective Date:
Paint					
Condition	Adequate				
Other (Content)					
Other (Capacity)					
Other (Type)					
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action					Corrective Date
Comment					
Venting:					
Yes/No	NO				
Comment					
Flaring:					
Type		Satisfactory/Action Required			
Comment:					
Corrective Action:					Correct Action Date:

Predrill

Location ID: 334520

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/AR: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**S/AR:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****S/AR:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Comment:** _____**Staking:****On Site Inspection (305):**Surface Owner Contact Information:

Name: _____

Address: _____

Phone Number: _____

Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____

Phone Number: _____

Date Onsite Request Received: _____

Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: 291438 Type: WELL API Number: 077-09339 Status: PR Insp. Status: SI

Facility ID: 291441 Type: WELL API Number: 077-09338 Status: PR Insp. Status: SI

Facility ID: 291442 Type: WELL API Number: 077-09337 Status: PR Insp. Status: SI

Facility ID: 295761 Type: WELL API Number: 077-09626 Status: PR Insp. Status: SI

Facility ID: 295762 Type: WELL API Number: 077-09625 Status: PR Insp. Status: SI

Facility ID: 295763 Type: WELL API Number: 077-09624 Status: PR Insp. Status: SI

Facility ID: 295764 Type: WELL API Number: 077-09623 Status: PR Insp. Status: SI

Facility ID: 295765	Type: WELL	API Number: 077-09622	Status: PR	Insp. Status: SI
Facility ID: 295766	Type: WELL	API Number: 077-09621	Status: PR	Insp. Status: SI
Facility ID: 295767	Type: WELL	API Number: 077-09620	Status: PR	Insp. Status: SI
Facility ID: 295768	Type: WELL	API Number: 077-09619	Status: PR	Insp. Status: SI
Facility ID: 295769	Type: WELL	API Number: 077-09618	Status: PR	Insp. Status: SI
Facility ID: 295770	Type: WELL	API Number: 077-09617	Status: PR	Insp. Status: SI
Facility ID: 297455	Type: WELL	API Number: 077-09693	Status: PR	Insp. Status: SI
Facility ID: 297456	Type: WELL	API Number: 077-09694	Status: PR	Insp. Status: SI

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment:

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

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

Water Well:

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

Field Parameters:

Sample Location:

Emission Control Burner (ECB): _____

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Interim Reclamation:

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

Land Use: _____

Comment:

1003a. Waste and Debris removed? _____

CM _____

CA _____

CA Date _____

Unused or unneeded equipment onsite? _____

CM _____

CA _____

CA Date _____

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

CM _____

CA _____

CA Date _____

Guy line anchors marked? _____

CM _____

CA _____

CA 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 REVEGETATIONCropland

Top soil replaced _____

Recontoured _____

Perennial forage re-established _____

Non-Cropland

Top soil replaced _____

Recontoured _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation**Final Reclamation/ Abandoned Location:**

Date Final Reclamation Started: _____

Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: _____

Well plugged _____

Pit mouse/rat holes, cellars backfilled _____

Debris removed _____

No disturbance /Location never built _____

Access Roads Regraded _____

Contoured _____

Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____

Locations, facilities, roads, recontoured _____

Compaction alleviation _____

Dust and erosion control _____

Non cropland: Revegetated 80% _____

Cropland: perennial forage _____

Weeds present _____

Subsidence _____

Comment: _____

Corrective Action: _____

Date _____

Overall Final Reclamation _____

Well Release on Active Location ☐Multi-Well Location ☐

Inspector Name: CONKLIN, CURTIS

Storm Water:						
Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Ditches	Pass					
Berms	Pass	Compaction	Pass			
Gravel	Pass					
Compaction	Pass	Gravel	Pass			

S/A/V: SATISFACTOR
Y
Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT

Attached Documents

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

Document Num	Description	URL
675202880	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3868176