

**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:

06/17/2016

Document Number:

675202942

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	334536	334536	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: SWSW Sec: 23 Twp: 8S Range: 92W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/09/2014	675200052			SATISFACTORY			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
278019	WELL	PR	07/01/2014	GW	077-08891	HELLS GULCH FEDERAL 23-11	PR	<input checked="" type="checkbox"/>
278020	WELL	PR	02/01/2015	GW	077-08890	HELLS GULCH FEDERAL 23-12	PR	<input checked="" type="checkbox"/>
278021	WELL	PR	02/01/2015	GW	077-08889	HELLS GULCH FEDERAL 23-14	PR	<input checked="" type="checkbox"/>
278022	WELL	PR	01/01/2011	GW	077-08888	HELLS GULCH FEDERAL 23-13	PR	<input checked="" type="checkbox"/>
290015	WELL	PR	02/01/2015	GW	077-09271	HELLS GULCH FED. 23 -11A	PR	<input checked="" type="checkbox"/>
290016	WELL	PR	02/01/2015	GW	077-09270	HELLS GULCH FED. 23 -12C	PR	<input checked="" type="checkbox"/>
290017	WELL	PR	01/01/2008	GW	077-09269	HELLS GULCH FED. 23 -12B	PR	<input checked="" type="checkbox"/>
290018	WELL	PR	10/24/2007	GW	077-09268	HELLS GULCH FEDERAL 23-12A	PR	<input checked="" type="checkbox"/>
290019	WELL	PR	04/23/2009	GW	077-09267	HELLS GULCH FED 23-11C	PR	<input checked="" type="checkbox"/>
290020	WELL	PR	01/01/2011	GW	077-09266	HELLS GULCH FED. 23 -14B	PR	<input checked="" type="checkbox"/>

Inspector Name: CONKLIN, CURTIS

290021	WELL	PR	10/08/2007	GW	077-09265	HELLS GULCH FED. 23 -14A	PR	<input checked="" type="checkbox"/>
290022	WELL	PR	07/06/2015	GW	077-09264	HELLS GULCH FED. 23 -11B	PR	<input checked="" type="checkbox"/>
296465	WELL	PR	04/23/2009	GW	077-09656	HELLS GULCH FEDERAL 23-13C	PR	<input checked="" type="checkbox"/>
296466	WELL	PR	01/01/2011	GW	077-09657	HELLS GULCH FEDERAL 23-14C	PR	<input checked="" type="checkbox"/>
296478	WELL	PR	04/23/2009	GW	077-09658	HELLS GULCH FEDERAL 23-13B	PR	<input checked="" type="checkbox"/>
296479	WELL	PR	04/23/2009	GW	077-09659	HELLS GULCH FEDERAL 23-13A	PR	<input checked="" type="checkbox"/>

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

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

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

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
METHANOL	1	1000 GAL	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:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	400 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
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action				Corrective Date
Comment				

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CONDENSATE	4	400 BBLS	STEEL AST	,
S/AR	SATISFACTORY	Comment:		
Corrective Action:				Corrective Date:

Paint

Inspector Name: CONKLIN, CURTIS

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: 334536

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: 278019 Type: WELL API Number: 077-08891 Status: PR Insp. Status: PR

Facility ID: 278020 Type: WELL API Number: 077-08890 Status: PR Insp. Status: PR

Facility ID: 278021 Type: WELL API Number: 077-08889 Status: PR Insp. Status: PR

Facility ID: 278022 Type: WELL API Number: 077-08888 Status: PR Insp. Status: PR

Facility ID: 290015 Type: WELL API Number: 077-09271 Status: PR Insp. Status: PR

Facility ID: 290016 Type: WELL API Number: 077-09270 Status: PR Insp. Status: PR

Facility ID: 290017 Type: WELL API Number: 077-09269 Status: PR Insp. Status: PR

Facility ID: 290018	Type: WELL	API Number: 077-09268	Status: PR	Insp. Status: PR
Facility ID: 290019	Type: WELL	API Number: 077-09267	Status: PR	Insp. Status: PR
Facility ID: 290020	Type: WELL	API Number: 077-09266	Status: PR	Insp. Status: PR
Facility ID: 290021	Type: WELL	API Number: 077-09265	Status: PR	Insp. Status: PR
Facility ID: 290022	Type: WELL	API Number: 077-09264	Status: PR	Insp. Status: PR
Facility ID: 296465	Type: WELL	API Number: 077-09656	Status: PR	Insp. Status: PR
Facility ID: 296466	Type: WELL	API Number: 077-09657	Status: PR	Insp. Status: PR
Facility ID: 296478	Type: WELL	API Number: 077-09658	Status: PR	Insp. Status: PR
Facility ID: 296479	Type: WELL	API Number: 077-09659	Status: PR	Insp. Status: PR

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 _____

Inspector Name: CONKLIN, CURTIS

Overall Final Reclamation _____	Well Release on Active Location <input type="checkbox"/>	Multi-Well Location <input type="checkbox"/>
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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	Culverts	Pass			
		Waddles	Pass			
Berms	Pass	Check Dams	Pass			
Waddles	Pass	Rip Rap	Pass			

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

Comment: _____

CA: _____

Pits: <input checked="" type="checkbox"/> NO SURFACE INDICATION OF PIT	
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