

**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:

08/11/2016

Document Number:

674703026

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335113	335113	LONGWORTH, MIKE	<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: Lot 4 Sec: 32 Twp: 6S Range: 97W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
11/09/2015	674702034			SATISFACTORY			No
05/23/2014	663903240			SATISFACTORY			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
275241	WELL	PR	10/09/2006	GW	045-13497	CASCADE CREEK 632-13-22	PR	<input checked="" type="checkbox"/>
282426	WELL	PR	06/06/2007	GW	045-11766	CASCADE CREEK 697-32-12D	PR	<input checked="" type="checkbox"/>
282427	WELL	PR	05/17/2007	GW	045-11767	CASCADE CREEK 697-29-59D	PR	<input checked="" type="checkbox"/>
282428	WELL	PR	05/17/2007	GW	045-11768	CASCADE CREEK 697-29-60D	PR	<input checked="" type="checkbox"/>
282429	WELL	PR	03/02/2016	GW	045-11769	CASCADE CREEK 697-32-09D	PR	<input checked="" type="checkbox"/>
282430	WELL	PR	06/01/2008	GW	045-11770	CASCADE CREEK 697-32-18D	PR	<input checked="" type="checkbox"/>
288549	WELL	PR	05/19/2010	GW	045-13290	CASCADE CREEK 697-32-10D	PR	<input checked="" type="checkbox"/>
288553	WELL	PR	05/17/2007	GW	045-13291	CASCADE CREEK 697-32-01D	PR	<input checked="" type="checkbox"/>
288554	WELL	PR	05/17/2007	GW	045-13292	CASCADE CREEK 697-32-03D	PR	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Inspector Name: LONGWORTH, MIKE

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

Signs/Marker:

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

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Equipment:

Type: Plunger Lift	# 9	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Ancillary equipment	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment	Chemical container at wells		
Corrective Action			Date:
Type: Bird Protectors	# 3	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Horizontal Heated Separator	# 9	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:

Tanks and Berms:

☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
METHANOL	1	<50 BBLS	STEEL AST	,

S/AR SATISFACTORY Comment: _____

Corrective Action: _____ Corrective Date: _____

Inspector Name: LONGWORTH, MIKE

<u>Paint</u>				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) 500 gallons				
Other (Type) _____				
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action				Corrective Date
Comment				

Tanks and Berms: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	1	400 BBLS	STEEL AST	,
S/AR	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:

<u>Paint</u>				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action				Corrective Date
Comment				

<u>Venting:</u>	
Yes/No	NO
Comment	

<u>Flaring:</u>	
Type	Satisfactory/Action Required
Comment:	
Corrective Action:	Correct Action Date:

Predrill

Location ID: 335113

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: 275241 Type: WELL API Number: 045-13497 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 282426 Type: WELL API Number: 045-11766 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 282427 Type: WELL API Number: 045-11767 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 282428 Type: WELL API Number: 045-11768 Status: PR Insp. Status: PR

Inspector Name: LONGWORTH, MIKE

Producing Well

Comment: **Producing well**

Facility ID: 282429 Type: WELL API Number: 045-11769 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 282430 Type: WELL API Number: 045-11770 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 288549 Type: WELL API Number: 045-13290 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 288553 Type: WELL API Number: 045-13291 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 288554 Type: WELL API Number: 045-13292 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

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:

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

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? Pass

CM _____

CA _____

CA Date _____

Unused or unneeded equipment onsite? Pass

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 _____

Inspector Name: LONGWORTH, MIKE

Weeds present _____ Subsidence _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation _____

Well Release on Active Location ☐

Multi-Well Location ☐

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Seeding	Pass					
Ditches	Pass					
		Culverts	Pass			
				Material Handling And Spill Prevention	Pass	
		Gravel	Pass			
Gravel	Pass					
Check Dams	Pass					
		Ditches	Pass			
Compaction	Pass					

S/A/V: SATISFACTORY _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT