

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:
08/16/2016
Document Number:
666802485
Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>420991</u>	<u>335507</u>	<u>Murray, Richard</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>96850</u>
Name of Operator:	<u>TEP ROCKY MOUNTAIN LLC</u>
Address:	<u>PO BOX 370</u>
City:	<u>PARACHUTE</u> State: <u>CO</u> Zip: <u>81635</u>

- 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
, Inspections		COGCCInspectionReports@terraep.com	Field Inspections

Compliance Summary:

QtrQtr:	<u>NWSE</u>	Sec:	<u>21</u>	Twp:	<u>6S</u>	Range:	<u>91W</u>
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
10/20/2014	666800083	PR	PR	SATISFACTORY			No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
300072	WELL	AL	06/23/2011	LO	045-17837	JOLLEY 21-311D	AL <input type="checkbox"/>
300503	WELL	AL	06/23/2011	LO	045-17917	JOLLEY 21-211D	AL <input type="checkbox"/>
300504	WELL	AL	06/23/2011	LO	045-17918	JOLLEY 21-29D	AL <input type="checkbox"/>
300505	WELL	AL	06/23/2011	LO	045-17919	JOLLEY 21-212D	AL <input type="checkbox"/>
300506	WELL	PR	03/14/2010	GW	045-17920	JOLLEY 21-210D	PR <input checked="" type="checkbox"/>
300507	WELL	AL	06/22/2011	LO	045-17921	JOLLEY 21-310D	AL <input type="checkbox"/>
300508	WELL	PR	03/01/2015	GW	045-17922	JOLLEY KP 33-21	PR <input checked="" type="checkbox"/>
300509	WELL	PR	04/01/2011	GW	045-17923	JOLLEY KP 533-21	PR <input checked="" type="checkbox"/>
420974	WELL	PR	04/01/2012	GW	045-20264	Jolley KP 423-21	PR <input checked="" type="checkbox"/>
420979	WELL	PR	04/01/2012	GW	045-20267	Jolley KP 523-21	PR <input checked="" type="checkbox"/>

420987	WELL	AL	08/13/2013	LO	045-20270	Jolley KP 23-21	AL	<input type="checkbox"/>
420991	WELL	PR	04/01/2012	GW	045-20273	Jolley KP 433-21	PR	<input checked="" type="checkbox"/>
420992	WELL	PR	04/01/2012	GW	045-20274	Jolley KP 333-21	PR	<input checked="" type="checkbox"/>

Equipment: Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>8</u>	Production Pits: _____
Condensate Tanks: <u>2</u>	Water Tanks: <u>4</u>	Separators: <u>8</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: <u>1</u>	Water Pipeline: <u>1</u>
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Emergency Contact Number (S/AR): SATISFACTORY Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Equipment:		Satisfactory/Action Required:
Type: Gas Meter Run	# 1	SATISFACTORY
Comment		
Corrective Action		Date:
Type: Emission Control Device	# 0	SATISFACTORY
Comment		
Corrective Action		Date:
Type: Horizontal Heated Separator	# 8	SATISFACTORY
Comment		
Corrective Action		Date:
Type: Dehydrator	# 0	SATISFACTORY
Comment		
Corrective Action		Date:
Type: Plunger Lift	# 7	SATISFACTORY
Comment		
Corrective Action		Date:
Type: Compressor	# 1	SATISFACTORY
Comment		
Corrective Action		Date:

Type: Ancillary equipment	# 3	Satisfactory/Action Required: SATISFACTORY
Comment: Chemical unit at separators		
Corrective Action		Date:

Tanks and Berms: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
LUBE OIL	1	OTHER	STEEL AST	,
S/AR	SATISFACTORY		Comment: At compressor	
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				

Tanks and Berms: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLS	STEEL AST	39.510334,-107.557674
S/AR	SATISFACTORY		Comment:	
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				

Tanks and Berms: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	4	300 BBLS	STEEL AST	,
S/AR	SATISFACTORY		Comment: Centralized battery	
Corrective Action:		Corrective Date:		

Paint

Condition	Adequate
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Inspector Name: Murray, Richard

Other (Content)	_____		
Other (Capacity)	_____		
Other (Type)	_____		
Berms			
Type	Capacity	Permeability (Wall)	Permeability (Base) Maintenance
Corrective Action			Corrective Date
Comment			

Venting:	
Yes/No	YES
Comment	Bradenhead valves open

Flaring:	
Type	Satisfactory/Action Required
Comment:	
Corrective Action:	Correct Action Date:

<u>Predrill</u>	
Location ID: 420991	
Lease Road Adeq.: _____	Pads: _____ Soil Stockpile: _____
S/AR: _____	
Corrective Action: _____	Date: _____ CDP Num.: _____

Form 2A COAs:			
Group	User	Comment	Date
OGLA	kubeczkod	Flowback and stimulation fluids must be sent to tanks to allow the sand to settle out before the fluids can be placed into any pipeline or pit located on the well pad. The flowback and stimulation fluid tanks must be placed on the well pad in an area with additional downgradient perimeter berming. The area where flowback fluids will be stored/reused must be constructed to be sufficiently impervious to contain any spilled or released material (per Rule 604.a.(4)).	12/15/2010
OGLA	kubeczkod	Berms or other containment devices shall be constructed in compliance with Rule 603.e.(12) around crude oil, condensate, and produced water storage tanks.	12/15/2010
OGLA	kubeczkod	Operator must implement best management practices to contain any unintentional release of fluids, including any fluids conveyed via temporary surface pipelines.	12/15/2010
OGLA	kubeczkod	The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1.	12/15/2010

OGLA	kubeczkod	No portion of any pit that will be used to hold liquids shall be constructed on fill material, unless the pit and fill slope are designed and certified by a professional engineer, subject to review and approval by the director prior to construction of the pit. The construction and lining of the pit shall be supervised by a professional engineer or their agent. The entire base of the pit must be in cut.	12/15/2010
OGLA	kubeczkod	Operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations; including, but not limited to, construction of a berm or diversion dike, diversion/collection trenches within and/or outside of berms/dikes, site grading, or other comparable measures (i.e., best management practices (BMPs) associated with stormwater management) sufficiently protective of nearby surface water. Any berm constructed at the well pad location will be stabilized, inspected at regular intervals (at least every 14 days), and maintained in good condition.	12/15/2010
OGLA	kubeczkod	Any pit that will hold liquids [if constructed], must be lined or a closed loop system (which has been indicated on the Form 2A by Williams) must be implemented during drilling.	12/15/2010

S/AR: SATISFACTORY **Comment:** No drilling or completions being performed at time of inspection, No visual sign of cuttings or pits

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: 300506 Type: WELL API Number: 045-17920 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 300508 Type: WELL API Number: 045-17922 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 300509 Type: WELL API Number: 045-17923 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 420974 Type: WELL API Number: 045-20264 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 420979 Type: WELL API Number: 045-20267 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 420991 Type: WELL API Number: 045-20273 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 420992 Type: WELL API Number: 045-20274 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

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): N

Comment: _____

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

Reclamation - Storm Water - Pit

Interim Reclamation:

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

Land Use: RANGELAND

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? Pass

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 REVEGETATION

Cropland

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: RANGELAND

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 _____

Inspector Name: Murray, Richard

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

Storm Water:						
Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
		Ditches	Pass			
Gravel	Pass					
		Culverts	Pass			
		Gravel	Pass			
Seeding	Pass					

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

Pits: NO SURFACE INDICATION OF PIT