

**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:

09/13/2016

Document Number:

666802562

Overall Inspection:

SATISFACTORY

FIELD INSPECTION FORM

| | | | | | |
|---------------------|---------------|---------------|------------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | <u>284203</u> | <u>335637</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: SWSW Sec: 9 Twp: 6S Range: 94W

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|--------------------|-------------|-------------------------------------|
| 111276 | PIT | | 09/23/1999 | | - | 1-M-9 | | <input type="checkbox"/> |
| 210728 | WELL | PR | 04/02/1985 | GW | 045-06486 | DOE 1-M-9 | PR | <input checked="" type="checkbox"/> |
| 210897 | WELL | PR | 12/01/1990 | GW | 045-06655 | DOE 1-W-9 | PR | <input checked="" type="checkbox"/> |
| 284203 | WELL | PR | 04/02/2007 | GW | 045-12117 | FEDERAL RWF 444-8 | PR | <input checked="" type="checkbox"/> |
| 284204 | WELL | PR | 04/02/2007 | GW | 045-12116 | FEDERAL RMV 165-9 | PR | <input checked="" type="checkbox"/> |
| 284205 | WELL | PR | 02/18/2008 | GW | 045-12115 | FEDERAL RWF 314-9 | PR | <input checked="" type="checkbox"/> |
| 284206 | WELL | PR | 04/02/2007 | GW | 045-12114 | FEDERAL RWF 44-8 | PR | <input checked="" type="checkbox"/> |
| 284207 | WELL | PR | 04/02/2007 | GW | 045-12113 | FEDERAL RWF 544-8 | PR | <input checked="" type="checkbox"/> |
| 284208 | WELL | PR | 04/02/2007 | GW | 045-12112 | FEDERAL RWF 411-16 | PR | <input checked="" type="checkbox"/> |
| 284209 | WELL | PR | 04/02/2007 | GW | 045-12111 | FEDERAL RWF 344-8 | PR | <input checked="" type="checkbox"/> |
| 284210 | WELL | PR | 04/02/2007 | GW | 045-12110 | FEDERAL RWF 414-9 | PR | <input checked="" type="checkbox"/> |
| 284211 | WELL | PR | 04/12/2006 | GW | 045-12109 | FEDERAL RWF 311-16 | PR | <input checked="" type="checkbox"/> |

Inspector Name: Murray, Richard

| | | | | | | | | |
|--------|------|----|------------|----|-----------|--------------------|----|-------------------------------------|
| 284212 | WELL | PR | 04/12/2006 | GW | 045-12108 | FEDERAL RWF 511-16 | PR | <input checked="" type="checkbox"/> |
| 284213 | WELL | PR | 04/12/2006 | GW | 045-12107 | FEDERAL RWF 11-16 | 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 Motors: _____ | 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 |
| BATTERY | SATISFACTORY | | | |

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: | | | | |
|-----------------------------------|----------------------------|-------------------------------|--------------|-------|
| Type: Plunger Lift | # 12 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | | | | |
| Corrective Action | | | | Date: |
| Type: Gas Meter Run | # 1 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | | | | |
| Corrective Action | | | | Date: |
| Type: Horizontal Heated Separator | # 12 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | | | | |
| Corrective Action | | | | Date: |
| Type: Ancillary equipment | # 2 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | Chemical units at wellhead | | | |
| Corrective Action | | | | Date: |

| Tanks and Berms: | | | | |
|-----------------------------------|--------------|----------------|----------------|-----------------------|
| <input type="checkbox"/> New Tank | | Tank ID: _____ | | |
| Contents | # | Capacity | Type | SE GPS |
| PRODUCED WATER | 1 | <100 BBLS | STEEL AST | 39.533527,-107.900170 |
| 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 | | | | |

| | |
|-----------------|------------------------|
| Venting: | |
| Yes/No | YES |
| Comment | Bradenhead valves open |

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

Predrill

Location ID: 284203

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: 210728 Type: WELL API Number: 045-06486 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 210897 Type: WELL API Number: 045-06655 Status: PR Insp. Status: PR

Producing Well

Comment: Producing

Facility ID: 284203 Type: WELL API Number: 045-12117 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 284204 Type: WELL API Number: 045-12116 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 284205 Type: WELL API Number: 045-12115 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 284206 Type: WELL API Number: 045-12114 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 284207 Type: WELL API Number: 045-12113 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 284208 Type: WELL API Number: 045-12112 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 284209 Type: WELL API Number: 045-12111 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 284210 Type: WELL API Number: 045-12110 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 284211 Type: WELL API Number: 045-12109 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 284212 Type: WELL API Number: 045-12108 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger lift**

Facility ID: 284213 Type: WELL API Number: 045-12107 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: _____

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: _____

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

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Seeding | Pass | | | | | |
| Ditches | Pass | | | | | |
| | | Gravel | Pass | | | |
| | | Culverts | Pass | | | |
| Retention Ponds | Pass | | | | | |
| | | Ditches | Pass | | | |

S/A/V: SATISFACTORY Corrective Date: _____

Comment:

CA:

Pits: NO SURFACE INDICATION OF PIT