

**FORM  
INSP**Rev  
X/15**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:

05/22/2017

Submitted Date:

05/23/2017

Document Number:

680401499**FIELD INSPECTION FORM**Loc ID 315617 Inspector Name: BROWNING, CHUCK On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 10112Name of Operator: FOUNDATION ENERGY MANAGEMENT LLCAddress: 1801 BROADWAY SUITE 1500City: DENVER State: CO Zip: 80202**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED

**Findings:**6 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name     | Phone        | Email                           | Comment                         |
|------------------|--------------|---------------------------------|---------------------------------|
| Contact, General |              | regulatory@foundationenergy.com | <a href="#">All inspections</a> |
| Browning, Chuck  | 970-433-4139 | chuck.browning@state.co.us      | <a href="#">Field Inspector</a> |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name                    | Insp Status |
|-------------|------|--------|-------------|------------|-----------|----------------------------------|-------------|
| 231156      | WELL | SI     | 07/12/2007  | DSPW       | 103-08825 | COLUMBINE SPRINGS 8-11-4-104 WDW | SI          |

**General Comment:**[Routine UIC Inspection.](#)

**Location****Lease Road:**

|                   |        |       |  |
|-------------------|--------|-------|--|
| Type              | Access |       |  |
| comment:          |        |       |  |
| Corrective Action |        | Date: |  |
| Type              | Main   |       |  |
| comment:          |        |       |  |
| Corrective Action |        | Date: |  |

Overall Good: ☒**Signs/Marker:**

|                    |          |       |  |
|--------------------|----------|-------|--|
| Type               | WELLHEAD |       |  |
| Comment:           |          |       |  |
| Corrective Action: |          | Date: |  |

**Emergency Contact Number:**

|                    |  |             |
|--------------------|--|-------------|
| Comment:           |  |             |
| Corrective Action: |  | Date: _____ |

Overall Good: ☐**Spills:**

|      |      |        |  |  |
|------|------|--------|--|--|
| Type | Area | Volume |  |  |
|------|------|--------|--|--|

In Containment: No

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

|                    |                                   |       |  |
|--------------------|-----------------------------------|-------|--|
| Type               | LOCATION                          |       |  |
| Comment:           | Locked chain link around facility |       |  |
| Corrective Action: |                                   | Date: |  |

**Equipment:**

|                    |  |       |                 |
|--------------------|--|-------|-----------------|
|                    |  |       | corrective date |
| Type: Prime Mover  | # 1                                      |       |                 |
| Comment:           | Pump in housing w/ filters and manifold. |       |                 |
| Corrective Action: |  | Date: |                 |

**Tanks and Berms:**

| Contents           | # | Capacity | Type             | Tank ID | SE GPS                |
|--------------------|---|----------|------------------|---------|-----------------------|
| PRODUCED WATER     | 1 | 400 BBLS | HEATED STEEL AST |         | 39.723158,-109.031095 |
| Comment:           |   |          |                  |         |                       |
| Corrective Action: |   |          |                  |         | Date:                 |

**Paint**

|                  |          |  |
|------------------|----------|--|
| Condition        | Adequate |  |
| Other (Content)  |          |  |
| Other (Capacity) |          |  |

|                    |          |                     |                     |             |                       |       |
|--------------------|----------|---------------------|---------------------|-------------|-----------------------|-------|
| Other (Type) _____ |          |                     |                     |             |                       |       |
| <u>Berms</u>       |          |                     |                     |             |                       |       |
| Type               | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |                       |       |
| Metal              | Adequate | Walls Sufficent     | Base Sufficent      | Adequate    |                       |       |
| Comment:           | _____    |                     |                     |             |                       |       |
| Corrective Action: | _____    |                     |                     |             | Date:                 | _____ |
| Contents           | #        | Capacity            | Type                | Tank ID     | SE GPS                |       |
| PRODUCED WATER     | 2        | 500 BBLs            | HEATED STEEL AST    |             | 39.723229,-109.031092 |       |
| Comment:           | _____    |                     |                     |             |                       |       |
| Corrective Action: | _____    |                     |                     |             | 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 Sufficent     | Base Sufficent      | Adequate    |                       |       |
| Comment:           | _____    |                     |                     |             |                       |       |
| Corrective Action: | _____    |                     |                     |             | Date:                 | _____ |
| Contents           | #        | Capacity            | Type                | Tank ID     | SE GPS                |       |
| CONDENSATE         | 4        | 400 BBLs            | HEATED STEEL AST    |             | 39.723229,-109.031092 |       |
| Comment:           | _____    |                     |                     |             |                       |       |
| Corrective Action: | _____    |                     |                     |             | 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 Sufficent     | Base Sufficent      | Adequate    |                       |       |
| Comment:           | _____    |                     |                     |             |                       |       |
| Corrective Action: | _____    |                     |                     |             | Date:                 | _____ |
| <u>Venting:</u>    |          |                     |                     |             |                       |       |
| Yes/No             | NO       |                     |                     |             |                       |       |
| Comment:           | _____    |                     |                     |             |                       |       |
| Corrective Action: | _____    |                     |                     |             | Date:                 | _____ |
| <u>Flaring:</u>    |          |                     |                     |             |                       |       |
| Type               | _____    |                     |                     |             |                       |       |

|                    |  |       |  |
|--------------------|--|-------|--|
| Comment:           |  |       |  |
| Corrective Action: |  | Date: |  |

**Inspected Facilities**Facility ID: 231156 Type: WELL API Number: 103-08825 Status: SI Insp. Status: SI**Underground Injection Control**

UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: \_\_\_\_\_

UIC RoutineInj./Tube: Pressure or inches of Hg 0 Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_

(e.g. 30 psig or -30" Hg)

Inj Zone: CSLGTTC: Pressure or inches of Hg 0 Previous Test Pressure \_\_\_\_\_ Last MIT: 02/21/2013Brhd: Pressure or inches of Hg 0 Previous Test Pressure \_\_\_\_\_ AnnMTReq: \_\_\_\_\_Comment: Routine UIC Inspection. Well shut in. No active injection at time of inspection.

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

Method of Injection: PUMP FEED

Test Type: \_\_\_\_\_ Tbg psi: \_\_\_\_\_ Csg psi: \_\_\_\_\_ BH psi: \_\_\_\_\_

Insp. Status: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

**Reclamation - Storm Water - Pit****Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs   | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|-----------------|--------------------------|---------|
| Gravel           | Pass            | Gravel                  | Pass                  | Self Inspection | Pass                     |         |

Comment: Corrective Action: Date: **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   |
|--------------|----------------------|---|
| 401290556    | INSPECTION SUBMITTED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4153489">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4153489</a> |