

FORM
INSPRev
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:

06/08/2017

Submitted Date:

06/09/2017

Document Number:

680401656

FIELD INSPECTION FORM

Loc ID 334518 Inspector Name: BROWNING, CHUCK On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

OGCC Operator Number: 10433
 Name of Operator: LARAMIE ENERGY LLC
 Address: 760 HORIZON DRIVE #101
 City: GRAND JUNCTION State: CO Zip: 81506

Findings:

9 Number of Comments
0 Number of Corrective Actions
 Corrective Action Response Requested

Contact Information:

| Contact Name | Phone | Email | Comment |
|-----------------|--------------|---------------------------------------|-----------------|
| Browning, Chuck | 970-433-4139 | chuck.browning@state.co.us | Field Inspector |
| Bankert, Wayne | 970-683-5419 | cogccnotifications@laramie-energy.com | All inspections |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------------|-------------|
| 273268 | WELL | PR | 07/15/2005 | GW | 077-08811 | MY WAY RANCH 17-7 | PR |
| 279728 | WELL | IJ | 09/05/2007 | DSPW | 077-08942 | MY WAY RANCH 17-2 | SI |
| 279729 | WELL | PR | 05/10/2012 | GW | 077-08943 | MY WAY RANCH 17-8 | PR |
| 280503 | WELL | PR | 11/18/2005 | GW | 077-08955 | MY WAY RANCH FED. 17-1 | PR |

General Comment:

[Routine UIC inspection.](#)

Location

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

Overall Good:

| | | | |
|----------------------|----------------------|--|-------|
| Signs/Marker: | | | |
| Type | BATTERY | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | | Date: |

Emergency Contact Number:

| | | | |
|--------------------|--|--|-------------|
| Comment: | <input style="width: 95%;" type="text"/> | | |
| Corrective Action: | <input style="width: 95%;" type="text"/> | | Date: _____ |

Overall Good:

| | | | | |
|----------------|------|--------|--|--|
| Spills: | | | | |
| Type | Area | Volume | | |

In Containment: No

Comment:

Multiple Spills and Releases?

| | | | |
|--------------------|---|--|-------|
| Fencing/: | | | |
| Type | WELLHEAD | | |
| Comment: | Injection well in housing | | |
| Corrective Action: | | | Date: |

| | | | | | |
|-----------------------------------|---------------------------------|--|--|--|-----------------|
| Equipment: | | | | | corrective date |
| Type: Horizontal Heated Separator | # 4 | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |
| Type: Prime Mover | # 1 | | | | |
| Comment: | Pump in housing | | | | |
| Corrective Action: | | | | | Date: |

Tanks and Berms:

| | | | | | | |
|--------------------|---|----------|-----------|---------|-----------------------|-------|
| Contents | # | Capacity | Type | Tank ID | SE GPS | |
| CONDENSATE | 2 | 300 BBLs | STEEL AST | | 39.190644,-107.903523 | |
| Comment: | | | | | | |
| Corrective Action: | | | | | | 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 |
| Comment: | | | | |
| Corrective Action: | | | | Date: |

| | | | | | | |
|--------------------|---|----------|-----------|---------|-----------------------|-------|
| Contents | # | Capacity | Type | Tank ID | SE GPS | |
| PRODUCED WATER | 6 | 400 BBLs | STEEL AST | | 39.190211,-107.903321 | |
| Comment: | | | | | | |
| Corrective Action: | | | | | | 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 |
| Comment: | | | | |
| Corrective Action: | | | | Date: |

Venting:

| | | | |
|--------------------|----|-------|--|
| Yes/No | NO | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Flaring:

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

Inspected Facilities

Facility ID: 273268 Type: WELL API Number: 077-08811 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Corrective Action: _____ Date: _____

Facility ID: 279728 Type: WELL API Number: 077-08942 Status: IJ Insp. Status: SI

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg 0 Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: WMFK

TC: Pressure or inches of Hg 265 Previous Test Pressure _____ Last MIT: 07/25/2013

Brhd: Pressure or inches of Hg 0 Previous Test Pressure _____ AnnMTReq: _____

Comment: Routine UIC Inspection. Well shut in.

Corrective Action: _____ Date: _____

Method of Injection: PUMP FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

Facility ID: 279729 Type: WELL API Number: 077-08943 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Corrective Action: _____ Date: _____

Facility ID: 280503 Type: WELL API Number: 077-08955 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

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 | Ditches | Pass | | | |
| Berms | Pass | Gravel | Pass | Self Inspection | Pass | |

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT