

**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:

07/25/2017

Submitted Date:

07/25/2017

Document Number:

689500044**FIELD INSPECTION FORM**

Loc ID 423560 Inspector Name: GRANAHAH, KYLE On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10384Name of Operator: GENESIS GAS & OIL COLORADO LLCAddress: 1660 LINCOLN ST STE 2100City: DENVER State: CO Zip: 80246**Status Summary:**

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

Findings:7 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name | Phone | Email | Comment |
|----------------|----------------|--------------------------------|----------|
| Jensen, David | (816) 222-7500 | djensen@genesisco.com | Exec. VP |
| Hull, Sheryl | 970-623-2833 | sheryl@myersenergyservices.com | Agent |
| Behner, Robert | 816-222-7500 | bbehner@genesisco.com | VP |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|----------------------|-------------|
| 423563 | WELL | SI | 05/14/2013 | GW | 103-11880 | CALAMITY RIDGE 14-31 | SI |

General Comment:

LocationOverall Good: ☒

| | | | |
|----------------------|------------------|-------|--|
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | Present/complete | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

Comment: 970-361-3007

Corrective Action: _____ Date: _____

Overall Good: ☒

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

In Containment: No

Comment: _____

☐ Multiple Spills and Releases?

| | | | |
|--------------------------|-----|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Gas Meter Run | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Pump Jack | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Deadman # & Marked | # 4 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Vertical Separator | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Venting:

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

Flaring:

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

Inspected FacilitiesFacility ID: 423563 Type: WELL API Number: 103-11880 Status: SI Insp. Status: SI**Idle Well**Purpose: ☒ Shut In ☐ Temporarily AbandonedReminder: EQUIPMENT ONSITEComment: SI - no leaks/venting, current MIT - doc # 1727231Corrective 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | Check Dams | Pass | | | |
| | | Compaction | Pass | | | |
| Compaction | Pass | | | | | |
| | | Gravel | Pass | | | |

Comment: No sediment flow evident

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT