

**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
Hull, Sheryl	970-623-2833	sheryl@myersenergyservices.com	Agent
Behner, Robert	816-222-7500	bbehner@genesisco.com	VP
Jensen, David	(816) 222-7500	djensen@genesisco.com	Exec. 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: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
Type: Vertical Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities									
Facility ID:	423563	Type:	WELL	API Number:	103-11880	Status:	SI	Insp. Status:	SI
Idle Well									
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: EQUIPMENT ONSITE									
Comment: <input type="text" value="SI - no leaks/venting, current MIT - doc # 1727231"/>									
Corrective Action: <input type="text"/> Date: <input type="text"/>									

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					
		Gravel	Pass			
		Compaction	Pass			

Comment: [No sediment flow evident](#)

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
401353632	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4207261