

**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:

09/11/2017

Submitted Date:

09/12/2017

Document Number:

680401857**FIELD INSPECTION FORM**
 Loc ID 324460 Inspector Name: BROWNING, CHUCK On-Site Inspection ☐ 2A Doc Num:
Operator Information:OGCC Operator Number: 10515Name of Operator: GUNNISON ENERGY LLCAddress: 1801 BROADWAY #1200City: DENVER State: CO Zip: 80202**Status Summary:**

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

Findings:2 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
McWilliams, Dan		dan.mcwilliams@oxbow.com	
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
211689	WELL	PR	05/01/2015	GW	051-06011	FEDERAL 10-90-33	SI

General Comment:

Location**Lease Road:**

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

Overall Good: ☒**Signs/Marker:**

Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:		
Corrective Action:		Date: _____

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Equipment:**

			corrective date
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	1	300 BBLS	STEEL AST		,	
Comment:						
Corrective Action:						Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)		
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Comment:					
Corrective Action:					Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			

Flaring:

Type			
Comment:			
Corrective Action:			

Inspected Facilities									
Facility ID:	211689	Type:	WELL	API Number:	051-06011	Status:	PR	Insp. Status:	SI
Idle Well									
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____									
Comment: <input type="text" value="Shut in for midstream repairs."/>									
Corrective Action: <input type="text"/> 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