

**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:

09/20/2017

Submitted Date:

09/20/2017

Document Number:

689700320**FIELD INSPECTION FORM**Loc ID 324361 Inspector Name: LONGWORTH, MIKE On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 96850Name of Operator: TEP ROCKY MOUNTAIN LLCAddress: PO BOX 370City: PARACHUTE State: CO Zip: 81635**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 |
|-----------------------|--------------|------------------------------------|---------|
| Inspection, Terra TEP | 970-263-2760 | COGCCInspectionReports@terraep.com |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name        | Insp Status |
|-------------|------|--------|-------------|------------|-----------|----------------------|-------------|
| 283522      | WELL | PR     | 02/28/2006  | GW         | 045-11934 | CHEVRON TR 21-22-597 | PR          |

**General Comment:**

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

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

Overall Good: ☒**Signs/Marker:**

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

**Emergency Contact Number:**

|                    |              |             |
|--------------------|--------------|-------------|
| Comment:           | 970-285-9377 |             |
| Corrective Action: |              | Date: _____ |

**Good Housekeeping:**

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

Overall Good: ☒**Spills:**

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

In Containment: No

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

|                    |              |       |  |
|--------------------|--------------|-------|--|
| Type               | SEPARATOR    |       |  |
| Comment:           |              |       |  |
| Corrective Action: |              | Date: |  |
| Type               | WELLHEAD     |       |  |
| Comment:           |              |       |  |
| Corrective Action: |              | Date: |  |
| Type               | TANK BATTERY |       |  |
| Comment:           |              |       |  |
| Corrective Action: |              | Date: |  |

|                                   |     |  |                 |
|-----------------------------------|-----|--|-----------------|
| <b>Equipment:</b>                 |     |  | corrective date |
| Type: Bird Protectors             | # 2 |  |                 |
| Comment:                          |     |  |                 |
| Corrective Action:                |     |  | Date:           |
| Type: Horizontal Heated Separator | # 1 |  |                 |
| Comment:                          |     |  |                 |
| Corrective Action:                |     |  | Date:           |
| Type: Plunger Lift                | # 1 |  |                 |
| Comment:                          |     |  |                 |
| Corrective Action:                |     |  | Date:           |
| Type: Dehydrator                  | # 1 |  |                 |
| Comment:                          |     |  |                 |
| Corrective Action:                |     |  | Date:           |

**Tanks and Berms:**

| Contents           | # | Capacity | Type      | Tank ID | SE GPS |
|--------------------|---|----------|-----------|---------|--------|
| CONDENSATE         | 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: |    | Date: |

**Flaring:**

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

| Inspected Facilities |                |       |      |             |           |         |    |               |    |
|----------------------|----------------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID:         | 283522         | Type: | WELL | API Number: | 045-11934 | Status: | PR | Insp. Status: | PR |
| Producing Well       |                |       |      |             |           |         |    |               |    |
| Comment:             | Producing well |       |      |             |           |         |    |               |    |
| 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
|                  |                 |                         |                       |               |                          |         |

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   |
|--------------|--------------------|---|
| 689700321    | TR 21-22-597 photo | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4257311">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4257311</a> |