

**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:

03/05/2018

Submitted Date:

03/05/2018

Document Number:

689500636**FIELD INSPECTION FORM**

Loc ID \_\_\_\_\_ Inspector Name: \_\_\_\_\_ On-Site Inspection ☐  
 316335 \_\_\_\_\_ GRANAHAN, KYLE \_\_\_\_\_ 2A Doc Num: \_\_\_\_\_

**Operator Information:**OGCC Operator Number: 200502Name of Operator: 31 OPERATINGAddress: 3021 RIDGE RD #156City: ROCKWALL State: TX Zip: 75032**Status Summary:**

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

**Findings:**11 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name  | Phone        | Email                       | Comment                            |
|---------------|--------------|-----------------------------|------------------------------------|
| Freeman, Kris | 972-810-1031 | kfreeman@31operating.com    | <a href="#">Rangely area wells</a> |
| , Sutherland  |              | msutherland@31operating.com | <a href="#">Rangely area wells</a> |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name              | Insp Status |
|-------------|------|--------|-------------|------------|-----------|----------------------------|-------------|
| 266494      | WELL | PR     | 09/20/2003  | GW         | 103-10275 | ANT HILL UNIT RBC WG 31-42 | PR          |

**General Comment:**[On location to conduct routine inspection](#)

**Location**Overall Good: ☒

|                      |  |       |  |
|----------------------|--|-------|--|
| <b>Signs/Marker:</b> |  |       |  |
| Type                 | WELLHEAD   |       |  |
| Comment:             | Present/complete - previous operator information present |       |  |
| Corrective Action:   |  | Date: |  |
| Type                 | CONTAINERS   |       |  |
| Comment:             | Present/complete   |       |  |
| Corrective Action:   |  | Date: |  |
| Type                 | TANK LABELS/PLACARDS                                     |       |  |
| Comment:             | Present/complete - previous operator information present |       |  |
| Corrective Action:   |  | Date: |  |
| Type                 | BATTERY  |       |  |
| Comment:             | Present/complete - previous operator information present |       |  |
| Corrective Action:   |  | Date: |  |

Emergency Contact Number:

Comment: 877-352-4660

Corrective Action:

Date: \_\_\_\_\_

Overall Good: ☒

|                |      |        |  |
|----------------|------|--------|--|
| <b>Spills:</b> |      |        |  |
| Type           | Area | Volume |  |

In Containment: No

Comment:

☐ Multiple Spills and Releases?

|                                 |                                      |       |                 |
|---------------------------------|--------------------------------------|-------|-----------------|
| <b>Equipment:</b>               |                                      |       | corrective date |
| Type: Ancillary equipment       | # 2                                  |       |                 |
| Comment:                        | Chem tote with secondary containment |       |                 |
| Corrective Action:              |                                      | Date: |                 |
| Type: Bird Protectors           | # 2                                  |       |                 |
| Comment:                        |                                      |       |                 |
| Corrective Action:              |                                      | Date: |                 |
| Type: Gas Meter Run             | # 1                                  |       |                 |
| Comment:                        |                                      |       |                 |
| Corrective Action:              |                                      | Date: |                 |
| Type: Plunger Lift              | # 1                                  |       |                 |
| Comment:                        |                                      |       |                 |
| Corrective Action:              |                                      | Date: |                 |
| Type: Horizontal Heater Treater | # 1                                  |       |                 |
| Comment:                        |                                      |       |                 |

|                          |     |       |  |
|--------------------------|-----|-------|--|
| Corrective Action:       |     | Date: |  |
| Type: Deadman # & Marked | # 4 |       |  |
| 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 |
|--------------------|----------|---------------------|---------------------|-------------|
|                    |          |                     |                     |             |
| Comment:           |          |                     |                     |             |
| Corrective Action: |          |                     |                     | Date:       |

| Contents           | # | Capacity | Type             | Tank ID | SE GPS |
|--------------------|---|----------|------------------|---------|--------|
| CRUDE OIL          | 1 | 300 BBLS | HEATED STEEL AST |         | ,      |
| Comment:           |   |          |                  |         |        |
| Corrective Action: |   |          |                  |         | Date:  |

Paint

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

Berms

| Type               | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|--------------------|----------|---------------------|---------------------|-------------|
| Metal              | Adequate | Walls Sufficent     | Base Sufficent      | Adequate    |
| Comment:           |          |                     |                     |             |
| Corrective Action: |          |                     |                     | Date:       |

**Venting:**

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

**Flaring:**

|          |  |
|----------|--|
| Type     |  |
| Comment: |  |

|                    |  |       |  |
|--------------------|--|-------|--|
| Corrective Action: |  | Date: |  |
|--------------------|--|-------|--|

| Inspected Facilities |  |       |      |             |           |         |    |               |    |
|----------------------|--|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID:         | 266494   | Type: | WELL | API Number: | 103-10275 | Status: | PR | Insp. Status: | PR |
| Producing Well       |  |       |      |             |           |         |    |               |    |
| Comment:             | Pr via plunger lift - no leaks/venting at time of inspection |       |      |             |           |         |    |               |    |
| 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            |                         |                       |               |                          |         |
| 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   |
|--------------|----------------------|---|
| 401563548    | INSPECTION SUBMITTED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4393773">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4393773</a> |
| 689500637    | Location             | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4393761">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4393761</a> |