

**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:

07/18/2018

Submitted Date:

07/18/2018

Document Number:

691300389

FIELD INSPECTION FORM

Loc ID 317502 Inspector Name: Kraich, Adam On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

OGCC Operator Number: 10110
Name of Operator: GREAT WESTERN OPERATING COMPANY LLC
Address: 1001 17TH STREET #2000
City: DENVER State: CO Zip: 80202

Findings:

- 3 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

Contact Information:

| Contact Name | Phone | Email | Comment |
|--------------|--------------|-----------------------------|---|
| , | | cogccinspections@gwogco.com | All Inspections |
| Kraich, Adam | 970-420-0536 | Adam.Kraich@state.co.us | (Area 117) Field Operations |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 238582 | WELL | SI | 02/01/2017 | ERIW | 123-05444 | BAIAMONTE 1 | SI |

General Comment:

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good:

Spills:

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

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:

Type WELLHEAD

Comment: Iron

Corrective Action:

Date: _____

Equipment:

corrective date

Type: Deadman # & Marked

2

Comment:

Corrective Action:

Date: _____

Venting:

Yes/No

Comment:

Corrective Action:

Date: _____

Flaring:

Type

Comment:

Corrective Action:

Date: _____

Inspected Facilities

Facility ID: 238582 Type: WELL API Number: 123-05444 Status: SI Insp. Status: SI

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg 0 Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: LYNS
 TC: Pressure or inches of Hg 0 Previous Test Pressure _____ Last MIT: 05/21/2014
 Brhd: Pressure or inches of Hg 0 Previous Test Pressure _____ AnnMTReq: _____

Comment:

Corrective Action: Date: _____

Method of Injection: _____

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment:

Corrective Action: Date: _____

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description | URL |
|--------------|-------------------|---|
| 691300393 | Inspection photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4526797 |