

**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:
08/16/2018

Submitted Date:
08/20/2018

Document Number:
685200534

FIELD INSPECTION FORM

Loc ID 325355 Inspector Name: LABOWSKIE, STEVE 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: 10663
Name of Operator: ENDURING RESOURCES LLC
Address: 1050 17TH STREET SUITE 2500
City: DENVER State: CO Zip: 80265

Findings:

9 Number of Comments
0 Number of Corrective Actions
 Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
McDaniel, James	505-444-3004	jmcdaniel@enduringresources.com	All Inspections
Walter, Kyle		kwalter@enduringresources.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
214631	WELL	IJ	01/01/2017	DSPW	067-06235	STATE 1-36	AC

General Comment:

Annual routine UIC inspection. Focus of inspection is wellbore and work area and adjacent tank battery. Well is within larger water/gas processing facility.

Location

Overall Good:

Signs/Marker:

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

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

Type			corrective date
Type: Other	# 2		
Comment:	chemical injection sytem and tanks within tank berms		
Corrective Action:		Date:	
Type: Ancillary equipment	# 1		
Comment:	wellhead		
Corrective Action:		Date:	
Type: Bird Protectors	# 1		
Comment:			
Corrective Action:		Date:	
Type: Flow Line	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	400 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
Earth	Adequate	Walls Sufficent	Base Sufficent	Adequate
Comment:	shares battery with 5 non-heated 400 bbl tanks			
Corrective Action:				Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	2	400 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 Sufficent	Base Sufficent	Adequate
Comment:	separate battery			
Corrective Action:				Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	5	400 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 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: 214631 Type: WELL API Number: 067-06235 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube:	Pressure or inches of Hg <u>997 psig</u> (e.g. 30 psig or -30" Hg)	Previous Test Pressure _____	MPP _____
TC:	Pressure or inches of Hg <u>.1 psig</u>	Previous Test Pressure _____	Inj Zone: <u>BLFF</u>
Brhd:	Pressure or inches of Hg <u>.1 psig</u>	Previous Test Pressure _____	Last MIT: <u>08/04/2014</u>
			AnnMTReq: _____

Comment: Blew casing down to soda bottle (dribble of fluid), no gas or fluid flow when casing valve left open.

Corrective Action: _____ Date: _____

Method of Injection: PUMP FEED

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

Insp. Status: _____

Comment:

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
Compaction	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass	Material Handling And Spill Prevention	Pass	chem tanks

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT