

**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:

01/15/2019

Submitted Date:

01/15/2019

Document Number:

689302976**FIELD INSPECTION FORM**
 Loc ID 323840 Inspector Name: Holtz, Darin 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:9 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE****Contact Information:**

| Contact Name | Phone | Email | Comment |
|--------------|-------|------------------------------------|---------------------------------|
| Rocky, TEP | | COGCCInspectionReports@terraep.com | All Inspections |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------|
| 210944 | WELL | PR | 10/02/1992 | GW | 045-06702 | BENTON GV 15-36 | PR |

General Comment:[Routine Field Inspection.](#)

Location**Lease Road:**

| | | | |
|-------------------|---------------|-------|--|
| Type | Access | | |
| comment: | Snow covered. | | |
| Corrective Action | L | Date: | |

Overall Good: ☒**Emergency Contact Number:**

| | | | |
|--------------------|----------------|-------|--|
| Comment: | 1-970-285-9377 | Date: | |
| Corrective Action: | | Date: | |

Good Housekeeping:

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

Overall Good: ☒**Spills:**

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

In Containment: No

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

| | | | |
|--------------------|------------------|-------|--|
| Type | SEPARATOR | | |
| Comment: | Hog panel fence. | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | Hog panel fence. | | |
| Corrective Action: | | Date: | |

Equipment:

| | | | |
|-----------------------|-----|-------|-----------------|
| Type: Bird Protectors | # 1 | | corrective date |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Plunger Lift | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 2 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

| | | | |
|-----------------------------------|---|--|-------|
| Type: Horizontal Heated Separator | # 1 | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Ancillary equipment | # 2 | | |
| Comment: | 1 chemical unit at wellhead. 1 chemical unit at Produced water tank. | | |
| Corrective Action: | | | Date: |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|---|-----------|-----------|---------|--------|
| PRODUCED WATER | 1 | <100 BBLs | 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 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: | 210944 | Type: | WELL | API Number: | 045-06702 | Status: | PR | Insp. Status: | PR |
| Producing Well | | | | | | | | | |
| Comment: | Well Producing on plunger lift. | | | | | | | | |
| 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: [Location is snow covered.](#)

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 |
|--------------|----------------------------|---|
| 689302977 | Inspection photo 689302977 | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4704892 |