

**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:

01/23/2019

Submitted Date:

01/24/2019

Document Number:

688303621**FIELD INSPECTION FORM**
 Loc ID 317125 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num:
Operator Information:OGCC Operator Number: 10634Name of Operator: P O & G OPERATING LLCAddress: 5847 SAN FELIPE SUITE 3200City: HOUSTON State: TX Zip: 77057**Status Summary:**

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

Findings:12 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
Hudson, Glenn	713-589-8186	glenn_hudson@pogresources.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
236572	WELL	PR	11/26/1996	OW	121-09062	WILSON 1	PR

General Comment:

Reinspection. Corrective actions from inspection #688300769 were completed (berms and valve leak).

LocationOverall Good: ☐**Signs/Marker:**

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

Emergency Contact Number:

Comment: 713-244-0779

Corrective Action:

Date: _____

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment:

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

Type	OTHER		
Comment:	steel panels around eletric pole		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	steel panels (tumbleweeds from blizzard that day)		
Corrective Action:		Date:	
Type	PUMP JACK		
Comment:	steel panels		
Corrective Action:		Date:	

Equipment:

Type: Vertical Heater Treater	# 1		corrective date
Comment:	bermed, shed, propane		
Corrective Action:		Date:	
Type: Ancillary equipment	# 0		
Comment:			
Corrective Action:		Date:	
Type: Prime Mover	# 1		

Comment:	electric motor	Date:	
Corrective Action:		Date:	
Type: Bird Protectors	# 3		
Comment:		Date:	
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:		Date:	
Corrective Action:		Date:	
Type: Pump Jack	# 1		
Comment:	chemical container	Date:	
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	200 BBLs	STEEL AST		,
Comment:					
Corrective Action:					Date:

Paint

Condition	
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:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	2	300 BBLs	STEEL AST		,
Comment:					
Corrective Action:					Date:

Paint

Condition	
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:

Location Construction

Location ID: 236572 CDP: _____

Comment: _____

Corrective Action: _____ Date: _____

Form 2A COAs:**Comment:** No COAs.

Corrective Action: _____ Date: _____

Wildlife BMPs:**Comment:** _____

Corrective Action: _____ Date: _____

Comment: _____**Corrective Action:** _____ Date: _____**On Site Inspection (305):****Surface Owner Contact Information:**

Name: _____ Address: _____

Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____

Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

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Summary of Operator Response to Landowner Issues:

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Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

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Inspected Facilities									
Facility ID:	236572	Type:	WELL	API Number:	121-09062	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	PR. Nov 2018 production reported to COGCC database.								
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	Material Handling And Spill Prevention	Pass	
Gravel	Pass	Gravel	Pass			

Comment: bull plugs on pipe ends

Corrective Action:

Date: _____

Pits: ☐ NO SURFACE INDICATION OF PITType: Produced WaterLined: NO

Pit ID:

Lat:

Long:

Reference Point: _____

Other: _____

Length: _____

Width: _____

Lining:

Liner Type:

Liner Condition:

Comment:

Corrective Action

Date:

Fencing:Fencing Type: LivestockFencing Condition: AdequateComment: Fence is on pasture side of pit.

Corrective Action

Date:

Netting:

Netting Type:

Netting Condition:

Comment:

Corrective Action

Date:

Anchor Trench Present:

Oil Accumulation: NO2+ feet Freeboard: YES

Comment:

Corrective Action

Date:

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

Document Num	Description	URL
688303633	P O & G Operating Wilson 1	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4714267