

FORM  
INSPRev  
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:

03/05/2019

Submitted Date:

03/05/2019

Document Number:

687903782

**FIELD INSPECTION FORM**

Loc ID \_\_\_\_\_ Inspector Name: \_\_\_\_\_ On-Site Inspection   
326614 \_\_\_\_\_ Stewart, Joseph \_\_\_\_\_ 2A Doc Num: \_\_\_\_\_

**Operator Information:**

OGCC Operator Number: 10663

Name of Operator: ENDURING RESOURCES LLC

Address: 1050 17TH STREET SUITE 2500

City: DENVER State: CO Zip: 80265

**Status Summary:**

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

**Findings:**

8 Number of Comments

0 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
Labowskie, Steve		steve.labowskie@state.co.us	
McDaniel, James	505-444-3004	jmcdaniel@enduringresources.com	<a href="#">SW Inspection Reports</a>
Walter, Kyle		kwalter@enduringresources.com	<a href="#">SW Inspection Reports</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
259126	WELL	PR	01/29/2001	GW	067-08401	STATE 36-4	PR

**General Comment:**

[Bradenhead test conducted with Southwest FIU supervisor Steve Labowskie.](#)

**Location**

Overall Good:

**Signs/Marker:**

Type OTHER

Comment: [Metal framed sign at entry to location.](#)

Corrective Action:

Date:

**Emergency Contact Number:**

Comment: [Correct emergency contact information.](#)

Corrective Action:

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

Overall Good:

**Spills:**

Type	Area	Volume

In Containment: No

Comment:

Multiple Spills and Releases?

**Equipment:**

corrective date

Type: Deadman # & Marked

# 4

Comment:

Corrective Action:

Date:

Type: Ancillary equipment

#

Comment: [Wellhead](#)

Corrective Action:

Date:

Type: Pump Jack

# 1

Comment:

Corrective Action:

Date:

Type: Horizontal Heated Separator

# 1

Comment:

Corrective Action:

Date:

Type: Other

# 1

Comment: [Generator](#)

Corrective Action:

Date:

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	<100 BBLS	PBV STEEL		,

Comment:

Corrective Action:

Date:

**Paint**

Condition Adequate

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:	

**Inspected Facilities**

Facility ID: 259126 Type: WELL API Number: 067-08401 Status: PR Insp. Status: PR

**BradenHead**

Comment:

Corrective Action:

Date: