

**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:

03/11/2019

Submitted Date:

03/11/2019

Document Number:

679703341**FIELD INSPECTION FORM**

Loc ID 315343 Inspector Name: Moran, Rick On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 51130Name of Operator: LOCIN OIL CORPORATIONAddress: 2445 TECHNOLOGY FOREST BD #710City: THE WOODLANDS State: TX Zip: 77381**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**7 Number of Comments1 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
Nicol, Michael	281-362-8600x116	mnicol@locinoil.com	All inspections
Kellerby, Shaun	970-712-1248	shaun.kellerby@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
230667	WELL	PR	11/03/1979	GW	103-08335	FORK UNIT-FEDERAL 15-12-1-2	PR

General Comment:[Routine well inspection](#)

Location

Overall Good: ☒

Signs/Marker:			
Type	BATTERY		
Comment:	Sign not updated to reflect current operator. Prior operator on sign. Phone number is current operator.		
Corrective Action:	Install sign to comply with Rule 210.e.	Date:	05/13/2019
Type	CONTAINERS		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 970-574-7607 or 970-574-7609

Corrective Action:

Date: _____

Overall Good: ☒

Spills:				
Type	Area	Volume		
In Containment: No				
Comment: _____				
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:			
Type	PIT		
Comment:			
Corrective Action:		Date:	

Equipment:			corrective date
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Plunger Lift	# 1		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Ancillary equipment	# 1		
Comment:	One container of methanol with secondary containment.		

Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities									
Facility ID:	230667	Type:	WELL	API Number:	103-08335	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	producing well 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
Berms	Pass					

Comment: Mud and 1" of snow on location.

Corrective Action:

Date: _____

Pits: ☐ NO SURFACE INDICATION OF PITType: Blowdown

Lined:

Pit ID:

Lat: 39.970970Long: -108.787250

Reference Point: _____

Other: _____

Length: _____

Width: _____

Lining:

Liner Type:

Liner Condition:

Comment:

Corrective Action

Date:

Fencing:Fencing Type: WildlifeFencing Condition: Adequate

Comment:

Corrective Action

Date:

Netting:

Netting Type:

Netting Condition:

Comment:

Corrective Action

Date:

Anchor Trench Present:

Oil Accumulation:

2+ 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
401968816	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4759698
401971230	inspection photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4761972
679703342	inspection photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4759690