

**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:

05/23/2019

Submitted Date:

05/23/2019

Document Number:

690003608**FIELD INSPECTION FORM**
 Loc ID 302455 Inspector Name: Carlile, Craig On-Site Inspection ☐ 2A Doc Num:                     
**Operator Information:**OGCC Operator Number: 10604Name of Operator: COMPLETE ENERGY SERVICES INCAddress: 4727 GAILLARDIA PKWY STE 250City: OKLAHOMA CITY State: OK Zip: 73142**Status Summary:**

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

**Findings:**10 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
Sellmer, Travis	(720) 606-1906	tsellmer@hpdswd.com	<a href="#">All Inspections</a>
		Jason.Henderson@Complete Energy.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
298847	WELL	IJ	04/12/2012	DSPW	123-29168	HPD PLATTEVILLE 1	IJ

**General Comment:**

**Location**Overall Good: ☒**Signs/Marker:**

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

**Emergency Contact Number:**

Comment:		
Corrective Action:		Date: _____

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

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

Type	WELLHEAD		
Comment:	Metal Shed enclosing wellhead.		
Corrective Action:		Date:	

**Equipment:**

			corrective date
Type: Prime Mover	# 1		
Comment:	450 HP Injection Pump		
Corrective Action:		Date:	
Type: Other	#		
Comment:	Injection Pump		
Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment:	500 HP for injection pump.		
Corrective Action:		Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	1000 GAL	STEEL AST		40.216921,-104.719660
Comment:					

Corrective Action:					Date:	
<u>Paint</u>						
Condition	Adequate					
Other (Content)						
Other (Capacity)						
Other (Type)						
<u>Berms</u>						
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance		
Other	Adequate	Walls Sufficent	Base Sufficent	Adequate		
Comment:						
Corrective Action:					Date:	
Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	1	OTHER			,	
Comment: Vault						
Corrective Action:					Date:	
<u>Paint</u>						
Condition						
Other (Content)						
Other (Capacity) 2000 Bbl						
Other (Type)						
<u>Berms</u>						
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance		
Comment:						
Corrective Action:					Date:	
Contents	#	Capacity	Type	Tank ID	SE GPS	
CRUDE OIL	2	OTHER	STEEL AST		,	
Comment:						
Corrective Action:					Date:	
<u>Paint</u>						
Condition						
Other (Content)						
Other (Capacity) 75 Bbl						
Other (Type)						
<u>Berms</u>						
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance		
Comment: Shared with 1000 Bbl tank						
Corrective Action:					Date:	
Contents	#	Capacity	Type	Tank ID	SE GPS	

PRODUCED WATER	6	OTHER	STEEL AST		,	
Comment:						
Corrective Action:						Date:
<b>Paint</b>						
Condition						
Other (Content)						
Other (Capacity)						
Other (Type)						
<b>Berms</b>						
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance		
Comment:	Shared with crude oil tanks.					
Corrective Action:						Date:
<b>Venting:</b>						
Yes/No	NO					
Comment:						
Corrective Action:						Date:
<b>Flaring:</b>						
Type						
Comment:						
Corrective Action:						Date:

**Inspected Facilities**Facility ID: 298847 Type: WELL API Number: 123-29168 Status: IJ Insp. Status: IJ**Underground Injection Control**

UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: \_\_\_\_\_

UIC Routine

Inj./Tube: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
 (e.g. 30 psig or -30" Hg) Inj Zone: ACGMI

TC: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ Last MIT: 06/13/2014

Brhd: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ AnnMTReq: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

Method of Injection: \_\_\_\_\_

Test Type: 5 Year Tbg psi: 776 Csg psi: 1442 BH psi: 0

Insp. Status: \_\_\_\_\_

Comment: Operator will submit chart. Initial tubing pressure: 776 psi, Initial casing pressure: 0 psi.  
 Initial Bradenhead Pressure: 0 PSI

Casing pressure was raised to 1442 and remained stable for 15 minutes and then slowly  
 disipated and returned to 0 psi.

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

**COGCC Comments**

Comment	User	Date
On Thursday, May 23, 2019 at 11:51, I, Craig Carlile conducted an on-site inspection at: High Plains Injection Facility, location number: 302455 Operated by: Complete Energy While there I observed: 5 Year Required MIT test of injection well. Form 21 to with pressure charts to be submitted by operator. Weather: Overcast, temp 42 degrees F Possible compliance issues observed: None This is a summary of the inspection report.	carlilec	05/23/2019

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

Document Num	Description	URL
690003609	Photos	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4830508">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4830508</a>