

**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:

06/26/2019

Submitted Date:

06/26/2019

Document Number:

696500086**FIELD INSPECTION FORM**

Loc ID 307201 Inspector Name: Peterson, Tom On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10312Name of Operator: PROSPECT ENERGY LLCAddress: 1036 COUNTRY CLUB ESTATES DRCity: CASTLE ROCK State: CO Zip: 80108**Status Summary:**

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

Findings:2 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
Gracey, Cameron		graceyservices@msn.com	
Koehler, Bob		bob.koehler@state.co.us	
Giltner, Ward		wgiltner@yahoo.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
217125	WELL	TA	03/01/2018	ERIW	069-06312	MSSU 17-1	TA

General Comment:

LocationOverall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:

Corrective Action: Date:

Overall Good: ☒

Spills:					
Type	Area	Volume			

In Containment: No

Comment: ☐ Multiple Spills and Releases?

Equipment:			corrective date
Type: Bradenhead	# 1		
Comment:	Bradenhead valve is exposed at surface		
Corrective Action:		Date:	
Type: Other	# 1		
Comment:	Wellhead enclosure		
Corrective Action:		Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected FacilitiesFacility ID: 217125 Type: WELL API Number: 069-06312 Status: TA Insp. Status: TA**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg 0 psig Previous Test Pressure _____ MPP _____
(e.g. 30 psig or -30" Hg) Inj Zone: MDDYJ

TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 03/26/2018

Brhd: Pressure or inches of Hg 0 psig Previous Test Pressure _____ AnnMTReq: _____

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

Idle WellPurpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: _____Comment: _____

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
Gravel	Pass	Gravel	Pass			

Comment: 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
696500087	Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4862628