

**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:

12/05/2019

Submitted Date:

12/06/2019

Document Number:

688306436**FIELD INSPECTION FORM**Loc ID 317044 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 95620Name of Operator: WESTERN OPERATING COMPANYAddress: 1165 DELAWARE STREET #200City: DENVER State: CO Zip: 80204**Status Summary:**

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

Findings:12 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
Crumley, Tim	(970) 768-5659	tcrumley@tcrumleypumpingsevice.com	
James, Steve	(303) 893-2438	steve@westernoperating.com	President
Reid, Marta	(303) 893-2438	marta@westernoperating.com	Designated Agent

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
234901	WELL	PR	10/15/2011	OW	121-07044	XENIA WEST UNIT 3-2	PR

General Comment:

Routine Inspection

Berms on south side of lined pit are eroding (see attached photos). Thirty days to maintain berms.

LocationOverall Good: ☒

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

Emergency Contact Number:

Comment: 303-893-2438

Corrective Action:

Date: _____

Overall Good: ☐

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	TANK BATTERY		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Equipment:			corrective date
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Vertical Heater Treater	# 1		

Comment: shed, bermed		Date:
Corrective Action:		Date:
Type: Flow Line	# 4	
Comment: marked		
Corrective Action:		Date:
Type: Other	# 1	
Comment: triplex pump		
Corrective Action:		Date:
Type: Vertical Separator	# 2	
Comment:		
Corrective Action:		Date:
Type: Ancillary equipment	# 3	
Comment: chemical containers		
Corrective Action:		Date:
Type: FWKO	# 1	
Comment:		
Corrective Action:		Date:
Type: Prime Mover	# 1	
Comment: electric		
Corrective Action:		Date:
Type: Bird Protectors	# 5	
Comment:		
Corrective Action:		Date:
Type: Submersible Pump	# 0	
Comment:		
Corrective Action:		Date:
Type: Pump Jack	# 1	
Comment:		
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 Sufficent	Base Sufficent	Adequate	
Comment:					
Corrective Action:					Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	3	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 Sufficent	Base Sufficent	Adequate	
Comment:					
Corrective Action:					Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	3	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 Sufficent	Base Sufficent	Adequate	
Comment:					
Corrective Action:					Date:

Venting:

Yes/No					
Comment:					
Corrective Action:					Date:

Flaring:

Type					
Comment:					
Corrective Action:					Date:

Location Construction

Location ID: 234901 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:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Inspected Facilities									
Facility ID:	234901	Type:	WELL	API Number:	121-07044	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	PR. Sep 2019 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
Gravel				Material Handling And Spill Prevention	Pass	

Comment: _____

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: Adequate

Comment: _____

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: _____

Type: Produced WaterLined: YES

Pit ID: _____

Lat: _____

Long: _____

Reference Point: _____

Other: _____

Length: _____

Width: _____

Lining:Liner Type: HDPELiner Condition: Adequate

Comment: _____

Corrective Action

Date: _____

Fencing:Fencing Type: WildlifeFencing Condition: Adequate

Comment: _____

Corrective Action

Date: _____

Netting:

Inspector Name: Sherman, Susan

Netting Type: <u>Mesh</u>	Netting Condition: <u>Good</u>	
Comment:		
Corrective Action		Date:
Anchor Trench Present:	Oil Accumulation: <u>NO</u>	2+ feet Freeboard: <u>YES</u>
Comment:	<u>Erosion on south side of pit (see attached photos).</u>	
Corrective Action	<u>Install or repair required BMPs per Rule 1002.f.(2)C.</u>	
		Date: <u>01/10/2020</u>

Attached Documents

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

Document Num	Description	URL
688306463	Western Operating Xenia West Unit 3-2	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5007651