

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:

06/17/2020

Submitted Date:

06/19/2020

Document Number:

688308021

FIELD INSPECTION FORM

Loc ID _____ Inspector Name: _____ On-Site Inspection
416953 _____ Sherman, Susan _____ 2A Doc Num: _____

Operator Information:

OGCC Operator Number: 10706
Name of Operator: D90 ENERGY LLC
Address: 202 TRAVIS STREET #402
City: HOUSTON State: TX Zip: 77002

Status Summary:

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

Findings:

- 13 Number of Comments
3 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
James, Cole	719-892-0378	cj0378@hotmail.com	Pumper
Quint, Craig		craig.quint@state.co.us	COGCC FIU Supervisor
Koehler, Bob		bob.koehler@state.co.us	COGCC UIC
Vincent, Kenny	(337) 654-9404	kvincent@reagan.com	Principal Agent
Oakes, Kevin	713-227-0391	kevin@d90energy.com	Designated Agent
Silverman, Daniel	713-227-0391	dsilverman@d90energy.com	President
Burn, Diana		diana.burn@state.co.us	COGCC Engineering Supervisor

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
416957	WELL	IJ	10/20/2017	DSPW	073-06413	JOHN CRAIG 7-2	SI

General Comment:

Routine UIC, failed because of tubing leak, well was shut in at time of inspection
Document #402190896 Form 10 (CO) (CC) IN PROCESS 03/25/2020 D90 ENERGY LLC.
Form 7s are delinquent, 9/1/2019 was last reported production to COGCC.
Last approved Form: (04 VENT_FLARE) 401216017 was 04/27/2017.

Location

Overall Good:

Signs/Marker:

Type	WELLHEAD		
Comment:	sign at well head and at entrance to pasture		
Corrective Action:		Date:	

Emergency Contact Number:

Comment:		Date:	
Corrective Action:			

Overall Good:

Spills:

Type	Area	Volume		
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In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:

Type	LOCATION		
Comment:			
Corrective Action:		Date:	

Equipment:

Type: Deadman # & Marked	# 4		corrective date
Comment:			
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
			CENTRALIZED BATTERY		,
Comment:					
Corrective Action:				Date:	

Paint

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Comment:		
Corrective Action:		Date:

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

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Location Construction

Location ID: 416957 CDP: _____

Comment: _____

Corrective Action: _____

Date: _____

Form 2A COAs:

Comment: Form: (04) 401216017 04/27/2017 1) Venting or flaring of natural gas shall comply with COGCC Rule 912. 2) Submit requests to flare annually to COGCC on Form 4 (Sundry Notice), which discusses timing to connect to sales line, plans to develop infrastructure, and justification for continued venting/flaring. Provide gas analysis including H2S with each Sundry Notice. 3) Report flaring volumes on Form 7, Operator's Monthly Report of Operations. 4) The operator is required to obtain and maintain any required air permits from CDPHE. The combustion device must comply with applicable design destruction efficiency for hydrocarbons (typically enclosed device 98%).

Corrective Action: **Submit Form 4 for review and approval to vent or flare.**

Date: 11/13/2019

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: 416957 Type: WELL API Number: 073-06413 Status: IJ Insp. Status: SI

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg -7.5 Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: CDHL
 TC: Pressure or inches of Hg -20 Previous Test Pressure _____ Last MIT: 07/08/2019
 Brhd: Pressure or inches of Hg SBDI Previous Test Pressure _____ AnnMTReq: _____

Comment: Brhd has slight blow that died immediately. Tubing and casing are connected because both are on a vacuum. SI well. Inspeotr notified COGCC/BK.

Corrective Action: Contact COGCC Engineering. Date: 06/26/2020

Method of Injection: GRAVITY FEED

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

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment: SI at time of inspection due to tubing leak.

Corrective Action: Submit required Form 7(s) to COGCC per rule 309. Date: 07/20/2020

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment

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
688308063	D90 Energy LLC, John Craig 7-2	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5179777