

**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:

06/26/2020

Submitted Date:

06/28/2020

Document Number:

693802267

**FIELD INSPECTION FORM**

Loc ID 414142 Inspector Name: BROWNING, CHUCK On-Site Inspection  2A Doc Num: \_\_\_\_\_

**Operator Information:**

OGCC Operator Number: 10433  
Name of Operator: LARAMIE ENERGY LLC  
Address: 760 HORIZON DRIVE #101  
City: GRAND JUNCTION State: CO Zip: 81506

**Status Summary:**

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

**Findings:**

9 Number of Comments  
0 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
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector
Bankert, Wayne	970-683-5419	cogccnotifications@laramie-energy.com	All inspections
Koehler, Bob		bob.koehler@state.co.us	
Labowskie, Steve		steve.labowskie@state.co.us	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
413145	WELL	IJ	11/01/2019	DSPW	103-11603	BDU 6606B F11X 199	AC

**General Comment:**

Routine UIC inspection. Injection well inspection only.

**Location**

<b>Lease Road:</b>			
Type	Access		
comment:			
Corrective ActionL			Date:
Type	Main		
comment:			
Corrective ActionL			Date:

Overall Good:

<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:			
Corrective Action:			Date:

Emergency Contact Number:

Comment:	1-800-891-6191 or 911		
Corrective Action:			Date: _____

Overall Good:

<b>Spills:</b>			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

<b>Fencing/:</b>			
Type	WELLHEAD		
Comment:	Wellhead inside housing		
Corrective Action:			Date:

<b>Equipment:</b>			corrective date
Type: Prime Mover	# 1		
Comment:	Pump inside housing		
Corrective Action:			Date:
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:			Date:
Type: Ancillary equipment	# 1		
Comment:	Generator		
Corrective Action:			Date:
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:			Date:

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

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	6	400 BBLs	HEATED STEEL AST		39.981781,-108.476263
Comment:					
Corrective Action:					Date:

**Paint**

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

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:				Date:

**Venting:**

Yes/No	NO	
Comment:		
Corrective Action:	Date:	

**Flaring:**

Type	
Comment:	
Corrective Action:	Date:

**Inspected Facilities**

Facility ID: 413145 Type: WELL API Number: 103-11603 Status: IJ Insp. Status: AC

**Underground Injection Control**

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

UIC Routine

Inj./Tube: Pressure or inches of Hg 450 Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
(e.g. 30 psig or -30" Hg) Inj Zone: OHCRK  
TC: Pressure or inches of Hg 112 Previous Test Pressure \_\_\_\_\_ Last MIT: 05/11/2018  
Brhd: Pressure or inches of Hg 0 Previous Test Pressure \_\_\_\_\_ AnnMTReq: \_\_\_\_\_

Comment: Routine UIC inspection. Injection well inspection only. No active injection at time of inspection.

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

Method of Injection: PUMP FEED

Test Type: \_\_\_\_\_ Tbg psi: \_\_\_\_\_ Csg psi: \_\_\_\_\_ BH psi: \_\_\_\_\_

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

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	Compaction	Pass	Material Handling And Spill Prevention	Pass	Secondary containment of chemicals

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
693802278	Inspection photos 6/26/2020	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5186032">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5186032</a>