

**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:

07/09/2020

Submitted Date:

07/10/2020

Document Number:

688308163**FIELD INSPECTION FORM**
 Loc ID 454144 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num:                     
**Operator Information:**OGCC Operator Number: 10646Name of Operator: AXIS EXPLORATION LLCAddress: 370 17TH ST SUITE 5300City: DENVER State: CO Zip: 80202**Status Summary:**

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

**Findings:**18 Number of Comments2 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 |
|-------------------|--------------|---------------------------------------|---------|
| Extraction        | 720-370-5540 | COGCCInspections@extracti<br>onog.com |         |
| Burn, Diana       |              | diana.burn@state.co.us                |         |
| Antonioli, Philip | 720-345-4603 | PAntonioli@extractionog.com           |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name      | Insp Status |
|-------------|------|--------|-------------|------------|-----------|--------------------|-------------|
| 454145      | WELL | XX     | 07/09/2018  |            | 005-07332 | Jamaso 4-65 5-6-5  | XX          |
| 454147      | WELL | DG     | 06/25/2019  |            | 005-07333 | Jamaso 4-65 5-6-3  | DG          |
| 454149      | WELL | DG     | 06/24/2019  |            | 005-07334 | Jamaso 4-65 5-6-1  | DG          |
| 454150      | WELL | XX     | 07/09/2018  |            | 005-07335 | Jamaso 4-65 5-6-8  | XX          |
| 454151      | WELL | DG     | 06/26/2019  |            | 005-07336 | Jamaso 4-65 5-6-7  | DG          |
| 454152      | WELL | DG     | 06/26/2019  |            | 005-07337 | Jamaso 4-65 5-6-6  | DG          |
| 454156      | WELL | XX     | 07/09/2018  |            | 005-07338 | Jamaso 4-65 5-6-2  | XX          |
| 454157      | WELL | DG     | 06/25/2019  |            | 005-07339 | Jamaso 4-65 5-6-4  | DG          |
| 455838      | WELL | DG     | 06/27/2019  |            | 005-07373 | Jamaso 4-65 5-6-9  | DG          |
| 455839      | WELL | DG     | 06/28/2019  |            | 005-07374 | Jamaso 4-65 5-6-12 | DG          |
| 455840      | WELL | DG     | 06/21/2019  |            | 005-07375 | Jamaso 4-65 5-6-10 | DG          |
| 455841      | WELL | XX     | 07/09/2018  |            | 005-07376 | Jamaso 4-65 5-6-11 | XX          |

**General Comment:**

Routine Inspection

This location has operator and operator's emergency contact information however a site location sign is required. There are 8 surface casing only wells and 4 conductor only wells. Bradenheads were done in 2019 and 2020 (per operator). Heavy equipment was sitting on location and had worked the surface. The combo for the gate is required for the inspector to access location.

| Location   |   |        |       |                 |
|--|---|--------|-------|-----------------|
| <b>Lease Road:</b>                                     |   |        |       |                 |
| Type   | Access  |        |       |                 |
| comment:   | Inspector does not have combo to gate.  |        |       |                 |
| Corrective Action                                      | L Provide key, combinations, or alternate method of access to comply with rule 204.           |        | Date: | 07/10/2020      |
| Overall Good: <input checked="" type="checkbox"/>      |   |        |       |                 |
| <b>Signs/Marker:</b>                                   |   |        |       |                 |
| Type   | WELLHEAD  |        |       |                 |
| Comment:   | No location sign at entrance.   |        |       |                 |
| Corrective Action:                                     | Install sign to comply with Rule 210.b.   |        | Date: | 10/09/2020      |
| Emergency Contact Number:                              |   |        |       |                 |
| Comment:   | 720-370-5540  |        |       |                 |
| Corrective Action:                                     |   |        |       | Date: _____     |
| <b>Good Housekeeping:</b>                              |   |        |       |                 |
| Type   |   |        |       |                 |
| Comment:   |   |        |       |                 |
| Corrective Action:                                     |   |        |       | Date:           |
| Overall Good: <input type="checkbox"/>                 |   |        |       |                 |
| <b>Spills:</b>   |   |        |       |                 |
| Type   | Area  | Volume |       |                 |
| In Containment: No                                     |   |        |       |                 |
| Comment:   |   |        |       |                 |
| <input type="checkbox"/> Multiple Spills and Releases? |   |        |       |                 |
| <b>Fencing/:</b>                                       |   |        |       |                 |
| Type   | WELLHEAD  |        |       |                 |
| Comment:   | steel panels  |        |       |                 |
| Corrective Action:                                     |   |        |       | Date:           |
| <b>Equipment:</b>                                      |   |        |       |                 |
|  |   |        |       | corrective date |
| Type: Bird Protectors                                  | # 1   |        |       |                 |
| Comment:   | The 07 well's cellar is filled with water. Remove water or cover cellar. See attached photos. |        |       |                 |
| Corrective Action:                                     |   |        |       | Date:           |
| <b>Venting:</b>  |   |        |       |                 |
| Yes/No   |   |        |       |                 |
| Comment:   |   |        |       |                 |
| Corrective Action:                                     |   |        |       | Date:           |
| <b>Flaring:</b>  |   |        |       |                 |
| Type   |   |        |       |                 |
| Comment:   |   |        |       |                 |

|                    |  |       |  |
|--------------------|--|-------|--|
| Corrective Action: |  | Date: |  |
|--------------------|--|-------|--|

**Inspected Facilities**

Facility ID: 454145 Type: WELL API Number: 005-07332 Status: XX Insp. Status: XX

**Well Drilling**

**Rig:** Rig Name: \_\_\_\_\_ Pusher/Rig Manager: \_\_\_\_\_  
 Permit Posted: \_\_\_\_\_ Access Sign: \_\_\_\_\_

**Well Control Equipment:**

Pipe Ram: \_\_\_\_\_ Blind Ram: \_\_\_\_\_ Hydril Type: \_\_\_\_\_  
 Pressure Test BOP: \_\_\_\_\_ Test Pressure PSI: \_\_\_\_\_ Safety Plan: \_\_\_\_\_

**Drill Fluids Management:**

Lined Pit: \_\_\_\_\_ Unlined Pit: \_\_\_\_\_ Closed Loop: \_\_\_\_\_ Semi-Closed Loop: \_\_\_\_\_  
 Multi-Well: \_\_\_\_\_ Disposal Location: \_\_\_\_\_  
 Comment: conductor set  
 Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

Facility ID: 454147 Type: WELL API Number: 005-07333 Status: DG Insp. Status: DG

**Well Drilling**

**Rig:** Rig Name: \_\_\_\_\_ Pusher/Rig Manager: \_\_\_\_\_  
 Permit Posted: \_\_\_\_\_ Access Sign: \_\_\_\_\_

**Well Control Equipment:**

Pipe Ram: \_\_\_\_\_ Blind Ram: \_\_\_\_\_ Hydril Type: \_\_\_\_\_  
 Pressure Test BOP: \_\_\_\_\_ Test Pressure PSI: \_\_\_\_\_ Safety Plan: \_\_\_\_\_

**Drill Fluids Management:**

Lined Pit: \_\_\_\_\_ Unlined Pit: \_\_\_\_\_ Closed Loop: \_\_\_\_\_ Semi-Closed Loop: \_\_\_\_\_  
 Multi-Well: \_\_\_\_\_ Disposal Location: \_\_\_\_\_  
 Comment: Surface casing set  
 Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

Facility ID: 454149 Type: WELL API Number: 005-07334 Status: DG Insp. Status: DG

**Well Drilling**

**Rig:** Rig Name: \_\_\_\_\_ Pusher/Rig Manager: \_\_\_\_\_  
 Permit Posted: \_\_\_\_\_ Access Sign: \_\_\_\_\_

**Well Control Equipment:**

Pipe Ram: \_\_\_\_\_ Blind Ram: \_\_\_\_\_ Hydril Type: \_\_\_\_\_  
 Pressure Test BOP: \_\_\_\_\_ Test Pressure PSI: \_\_\_\_\_ Safety Plan: \_\_\_\_\_

**Drill Fluids Management:**

Lined Pit: \_\_\_\_\_ Unlined Pit: \_\_\_\_\_ Closed Loop: \_\_\_\_\_ Semi-Closed Loop: \_\_\_\_\_  
 Multi-Well: \_\_\_\_\_ Disposal Location: \_\_\_\_\_  
 Comment: surface casing set  
 Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

Facility ID: 454150 Type: WELL API Number: 005-07335 Status: XX Insp. Status: XX

**Well Drilling**

**Rig:** Rig Name: \_\_\_\_\_ Pusher/Rig Manager: \_\_\_\_\_  
 Permit Posted: \_\_\_\_\_ Access Sign: \_\_\_\_\_

**Well Control Equipment:**

Pipe Ram: \_\_\_\_\_ Blind Ram: \_\_\_\_\_ Hydril Type: \_\_\_\_\_  
 Pressure Test BOP: \_\_\_\_\_ Test Pressure PSI: \_\_\_\_\_ Safety Plan: \_\_\_\_\_

**Drill Fluids Management:**

Lined Pit: \_\_\_\_\_ Unlined Pit: \_\_\_\_\_ Closed Loop: \_\_\_\_\_ Semi-Closed Loop: \_\_\_\_\_  
 Multi-Well: \_\_\_\_\_ Disposal Location: \_\_\_\_\_

Comment: [conductor set](#)

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

Facility ID: 454151 Type: WELL API Number: 005-07336 Status: DG Insp. Status: DG

**Well Drilling**

**Rig:** Rig Name: \_\_\_\_\_ Pusher/Rig Manager: \_\_\_\_\_  
 Permit Posted: \_\_\_\_\_ Access Sign: \_\_\_\_\_

**Well Control Equipment:**

Pipe Ram: \_\_\_\_\_ Blind Ram: \_\_\_\_\_ Hydril Type: \_\_\_\_\_  
 Pressure Test BOP: \_\_\_\_\_ Test Pressure PSI: \_\_\_\_\_ Safety Plan: \_\_\_\_\_

**Drill Fluids Management:**

Lined Pit: \_\_\_\_\_ Unlined Pit: \_\_\_\_\_ Closed Loop: \_\_\_\_\_ Semi-Closed Loop: \_\_\_\_\_  
 Multi-Well: \_\_\_\_\_ Disposal Location: \_\_\_\_\_

Comment: [surface casing set](#)

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

Facility ID: 454152 Type: WELL API Number: 005-07337 Status: DG Insp. Status: DG

**Well Drilling**

**Rig:** Rig Name: \_\_\_\_\_ Pusher/Rig Manager: \_\_\_\_\_  
 Permit Posted: \_\_\_\_\_ Access Sign: \_\_\_\_\_

**Well Control Equipment:**

Pipe Ram: \_\_\_\_\_ Blind Ram: \_\_\_\_\_ Hydril Type: \_\_\_\_\_  
 Pressure Test BOP: \_\_\_\_\_ Test Pressure PSI: \_\_\_\_\_ Safety Plan: \_\_\_\_\_

**Drill Fluids Management:**

Lined Pit: \_\_\_\_\_ Unlined Pit: \_\_\_\_\_ Closed Loop: \_\_\_\_\_ Semi-Closed Loop: \_\_\_\_\_  
 Multi-Well: \_\_\_\_\_ Disposal Location: \_\_\_\_\_

Comment: [surface casing set](#)

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

Facility ID: 454156 Type: WELL API Number: 005-07338 Status: XX Insp. Status: XX

**Well Drilling**

**Rig:** Rig Name: \_\_\_\_\_ Pusher/Rig Manager: \_\_\_\_\_

Permit Posted: \_\_\_\_\_

Access Sign: \_\_\_\_\_

**Well Control Equipment:**

Pipe Ram: \_\_\_\_\_ Blind Ram: \_\_\_\_\_ Hydril Type: \_\_\_\_\_

Pressure Test BOP: \_\_\_\_\_ Test Pressure PSI: \_\_\_\_\_ Safety Plan: \_\_\_\_\_

**Drill Fluids Management:**

Lined Pit: \_\_\_\_\_ Unlined Pit: \_\_\_\_\_ Closed Loop: \_\_\_\_\_ Semi-Closed Loop: \_\_\_\_\_

Multi-Well: \_\_\_\_\_ Disposal Location: \_\_\_\_\_

Comment: [conductor set](#)

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

Facility ID: 454157 Type: WELL API Number: 005-07339 Status: DG Insp. Status: DG**Well Drilling****Rig:** Rig Name: \_\_\_\_\_ Pusher/Rig Manager: \_\_\_\_\_

Permit Posted: \_\_\_\_\_ Access Sign: \_\_\_\_\_

**Well Control Equipment:**

Pipe Ram: \_\_\_\_\_ Blind Ram: \_\_\_\_\_ Hydril Type: \_\_\_\_\_

Pressure Test BOP: \_\_\_\_\_ Test Pressure PSI: \_\_\_\_\_ Safety Plan: \_\_\_\_\_

**Drill Fluids Management:**

Lined Pit: \_\_\_\_\_ Unlined Pit: \_\_\_\_\_ Closed Loop: \_\_\_\_\_ Semi-Closed Loop: \_\_\_\_\_

Multi-Well: \_\_\_\_\_ Disposal Location: \_\_\_\_\_

Comment: [surface casing set](#)

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

Facility ID: 455838 Type: WELL API Number: 005-07373 Status: DG Insp. Status: DG**Well Drilling****Rig:** Rig Name: \_\_\_\_\_ Pusher/Rig Manager: \_\_\_\_\_

Permit Posted: \_\_\_\_\_ Access Sign: \_\_\_\_\_

**Well Control Equipment:**

Pipe Ram: \_\_\_\_\_ Blind Ram: \_\_\_\_\_ Hydril Type: \_\_\_\_\_

Pressure Test BOP: \_\_\_\_\_ Test Pressure PSI: \_\_\_\_\_ Safety Plan: \_\_\_\_\_

**Drill Fluids Management:**

Lined Pit: \_\_\_\_\_ Unlined Pit: \_\_\_\_\_ Closed Loop: \_\_\_\_\_ Semi-Closed Loop: \_\_\_\_\_

Multi-Well: \_\_\_\_\_ Disposal Location: \_\_\_\_\_

Comment: [surface casing set](#)

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

Facility ID: 455839 Type: WELL API Number: 005-07374 Status: DG Insp. Status: DG**Well Drilling****Rig:** Rig Name: \_\_\_\_\_ Pusher/Rig Manager: \_\_\_\_\_

Permit Posted: \_\_\_\_\_ Access Sign: \_\_\_\_\_

**Well Control Equipment:**

|  |                          |                         |
|--|--------------------------|-------------------------|
| Pipe Ram: _____                        | Blind Ram: _____         | Hydril Type: _____      |
| Pressure Test BOP: _____               | Test Pressure PSI: _____ | Safety Plan: _____      |
| <b><u>Drill Fluids Management:</u></b> |                          |                         |
| Lined Pit: _____                       | Unlined Pit: _____       | Closed Loop: _____      |
| Multi-Well: _____                      | Disposal Location: _____ | Semi-Closed Loop: _____ |
| Comment: <u>surface casing set</u>     |                          |                         |
| Corrective Action: _____               | Date: _____              |                         |

|                     |            |                       |            |                  |
|---------------------|------------|-----------------------|------------|------------------|
| Facility ID: 455840 | Type: WELL | API Number: 005-07375 | Status: DG | Insp. Status: DG |
|---------------------|------------|-----------------------|------------|------------------|

**Well Drilling**

**Rig:** Rig Name: \_\_\_\_\_ Pusher/Rig Manager: \_\_\_\_\_  
 Permit Posted: \_\_\_\_\_ Access Sign: \_\_\_\_\_

**Well Control Equipment:**

|                          |                          |                    |
|--------------------------|--------------------------|--------------------|
| Pipe Ram: _____          | Blind Ram: _____         | Hydril Type: _____ |
| Pressure Test BOP: _____ | Test Pressure PSI: _____ | Safety Plan: _____ |

**Drill Fluids Management:**

|                                    |                          |                    |                         |
|------------------------------------|--------------------------|--------------------|-------------------------|
| Lined Pit: _____                   | Unlined Pit: _____       | Closed Loop: _____ | Semi-Closed Loop: _____ |
| Multi-Well: _____                  | Disposal Location: _____ |                    |                         |
| Comment: <u>surface casing set</u> |                          |                    |                         |
| Corrective Action: _____           | Date: _____              |                    |                         |

|                     |            |                       |            |                  |
|---------------------|------------|-----------------------|------------|------------------|
| Facility ID: 455841 | Type: WELL | API Number: 005-07376 | Status: XX | Insp. Status: XX |
|---------------------|------------|-----------------------|------------|------------------|

**Well Drilling**

**Rig:** Rig Name: \_\_\_\_\_ Pusher/Rig Manager: \_\_\_\_\_  
 Permit Posted: \_\_\_\_\_ Access Sign: \_\_\_\_\_

**Well Control Equipment:**

|                          |                          |                    |
|--------------------------|--------------------------|--------------------|
| Pipe Ram: _____          | Blind Ram: _____         | Hydril Type: _____ |
| Pressure Test BOP: _____ | Test Pressure PSI: _____ | Safety Plan: _____ |

**Drill Fluids Management:**

|                               |                          |                    |                         |
|-------------------------------|--------------------------|--------------------|-------------------------|
| Lined Pit: _____              | Unlined Pit: _____       | Closed Loop: _____ | Semi-Closed Loop: _____ |
| Multi-Well: _____             | Disposal Location: _____ |                    |                         |
| Comment: <u>conductor set</u> |                          |                    |                         |
| Corrective Action: _____      | Date: _____              |                    |                         |

**Attached Documents**

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

| Document Num | Description                          | URL   |
|--------------|--------------------------------------|---|
| 402441487    | INSPECTION SUBMITTED                 | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5194319">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5194319</a> |
| 688308168    | Axis Exploration Jamaso 4 -65 5-6-10 | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5194315">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5194315</a> |