

FORM
INSPRev
X/15State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Inspection Date:

07/21/2020

Submitted Date:

07/21/2020

Document Number:

689804452

FIELD INSPECTION FORM

 Loc ID _____ Inspector Name: _____ On-Site Inspection
 313060 _____ Waldron, Emily _____ 2A Doc Num: _____
Operator Information:
 OGCC Operator Number: 10559
 Name of Operator: SOUTHLAND ROYALTY COMPANY LLC
 Address: 400 WEST 7TH STREET
 City: FORT WORTH State: TX Zip: 76102
Status Summary:

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

Findings:

- 4 Number of Comments
 1 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
Elgin, Jerry		jelgin@mspartners.com	
Gallenbeck, Danny		dgallenbeck@ctfieldsvcs.com	
Blaylock, Connie		cblaylock@mspartners.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
223491	WELL	SI	07/01/2018	GW	081-06857	PEPLER FEE COM 12-18	TA

General Comment:

Inspector on location to witness MIT. Form 42 document number 402438930. Casing pressured to 420 PSI and held for 15 minutes. A follow up inspection was also performed on inspection from 3/27/2020 document number 689803862. All corrective actions have been met.

Location

Overall Good:

Signs/Marker:

	Type WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:	307-324-2658		
Corrective Action:		Date:	

Overall Good:

Spills:

Type	Area	Volume			

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

						corrective date
Type: Gas Meter Run	# 1					
Comment:						
Corrective Action:				Date:		
Type: Horizontal Heated Separator	# 1					
Comment:						
Corrective Action:				Date:		
Type: Bird Protectors	#					
Comment:						
Corrective Action:				Date:		

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 223491 Type: WELL API Number: 081-06857 Status: SI Insp. Status: TA

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment: Inspector on location to witness MIT. Form 42 document number 402438930. Casing pressured to 420 PSI and held for 15 minutes.

TA status has not been approved via Form 4.

Corrective Action: **Submit for Form 4 to request approval for TA status.**

Date: 07/31/2020

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: No apparent soil migration; erosion or soil movement.

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
402447965	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5200871
689804454	Inspection Photo	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5200868