

**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:

11/05/2020

Submitted Date:

11/12/2020

Document Number:

689804954**FIELD INSPECTION FORM**Loc ID 312773 Inspector Name: Waldron, Emily On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 10428Name of Operator: DIVERSIFIED ENERGY LLCAddress: 19501 E MAIN STREET #200City: PARKER State: CO Zip: 80138**Status Summary:**

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

**Findings:**4 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 |
|-----------------|--------------|--------------------------|---------|
| Schlatter, Gary | 303-618-2799 | gschlatter@oralabs.com   |         |
| Haack, Jason    | 303-995-0826 | jhaack@oagproduction.com |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 222313      | WELL | SI     | 12/01/2019  | OW         | 081-05289 | J P WEISE 1   | SI          |

**General Comment:**

Routine FIU inspection.

**Location**Overall Good: ☐

|                      |                      |       |  |
|----------------------|----------------------|-------|--|
| <b>Signs/Marker:</b> |                      |       |  |
| Type                 | WELLHEAD             |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |
| Type                 | TANK LABELS/PLACARDS |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |
| Type                 | BATTERY              |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |

Emergency Contact Number:

Comment: 303-995-0826

Corrective Action:

Date: \_\_\_\_\_

**Good Housekeeping:**

|                    |                                 |       |            |
|--------------------|---------------------------------|-------|------------|
| Type               | DEBRIS                          |       |            |
| Comment:           | Dried annual weeds on location. |       |            |
| Corrective Action: | Comply with Rule 603.f .        | Date: | 11/26/2020 |

Overall Good: ☐

|  |      |        |  |
|--|------|--------|--|
| <b>Spills:</b>   |      |        |  |
| Type   | Area | Volume |  |
| In Containment: No                                     |      |        |  |
| Comment: _____   |      |        |  |
| <input type="checkbox"/> Multiple Spills and Releases? |      |        |  |

**Fencing/:**

|                    |          |       |  |
|--------------------|----------|-------|--|
| Type               | LOCATION |       |  |
| Comment:           |          |       |  |
| Corrective Action: |          | Date: |  |

**Equipment:**

|                                 |     |       |                 |
|---------------------------------|-----|-------|-----------------|
|                                 |     |       | corrective date |
| Type: Pump Jack                 | # 1 |       |                 |
| Comment:                        |     |       |                 |
| Corrective Action:              |     | Date: |                 |
| Type: Bird Protectors           | #   |       |                 |
| Comment:                        |     |       |                 |
| Corrective Action:              |     | Date: |                 |
| Type: Vertical Heated Separator | # 1 |       |                 |
| Comment:                        |     |       |                 |
| Corrective Action:              |     | Date: |                 |

**Tanks and Berms:**

|                    |   |          |           |         |        |       |
|--------------------|---|----------|-----------|---------|--------|-------|
| Contents           | # | Capacity | Type      | Tank ID | SE GPS |       |
| PRODUCED WATER     | 1 | 400 BBLs | STEEL AST |         | ,      |       |
| Comment:           |   |          |           |         |        |       |
| Corrective Action: |   |          |           |         |        | Date: |

**Paint**

|                  |  |  |  |  |  |
|------------------|--|--|--|--|--|
| Condition        |  |  |  |  |  |
| Other (Content)  |  |  |  |  |  |
| Other (Capacity) |  |  |  |  |  |
| Other (Type)     |  |  |  |  |  |

**Berms**

|                    |          |                     |                     |             |       |
|--------------------|----------|---------------------|---------------------|-------------|-------|
| Type               | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |       |
| Earth              |          |                     |                     |             |       |
| Comment:           |          |                     |                     |             |       |
| Corrective Action: |          |                     |                     |             | Date: |

|                    |   |          |           |         |        |       |
|--------------------|---|----------|-----------|---------|--------|-------|
| Contents           | # | Capacity | Type      | Tank ID | SE GPS |       |
| CRUDE OIL          | 4 | 400 BBLs | STEEL AST |         | ,      |       |
| Comment:           |   |          |           |         |        |       |
| Corrective Action: |   |          |           |         |        | Date: |

**Paint**

|                  |  |  |  |  |  |
|------------------|--|--|--|--|--|
| Condition        |  |  |  |  |  |
| Other (Content)  |  |  |  |  |  |
| Other (Capacity) |  |  |  |  |  |
| Other (Type)     |  |  |  |  |  |

**Berms**

|                    |          |                     |                     |             |       |
|--------------------|----------|---------------------|---------------------|-------------|-------|
| Type               | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |       |
| Earth              |          |                     |                     |             |       |
| Comment:           |          |                     |                     |             |       |
| Corrective Action: |          |                     |                     |             | Date: |

**Venting:**

|                    |    |  |       |
|--------------------|----|--|-------|
| Yes/No             | NO |  |       |
| Comment:           |    |  |       |
| Corrective Action: |    |  | Date: |

**Flaring:**

|                    |  |  |       |
|--------------------|--|--|-------|
| Type               |  |  |       |
| Comment:           |  |  |       |
| Corrective Action: |  |  | Date: |

| Inspected Facilities  |        |       |      |             |           |         |    |               |    |
|---|--------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID:  | 222313 | Type: | WELL | API Number: | 081-05289 | Status: | SI | Insp. Status: | SI |
| Idle Well   |        |       |      |             |           |         |    |               |    |
| Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____ |        |       |      |             |           |         |    |               |    |
| 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
|                  |                 |                         |                       |               |                          |         |

Comment: [No apparent soil migration; erosion or soil movement.](#)

Corrective Action:

Date: \_\_\_\_\_

**Pits:** ☐ NO SURFACE INDICATION OF PIT

|         |             |            |                 |
|---------|-------------|------------|-----------------|
| Permit: | Facility ID | Permit Num | Expiration Date |
|         | 284545      | 1433383    |                 |

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

| Document Num | Description       | URL   |
|--------------|-------------------|---|
| 689804955    | Inspection Photos | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5290078">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5290078</a> |