

**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:

12/23/2020

Submitted Date:

12/31/2020

Document Number:

700404758**FIELD INSPECTION FORM**Loc ID 315509 Inspector Name: Moran, Rick On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 10654Name of Operator: LASSO OIL & GAS LLCAddress: 3021 RIDGE RD #156City: ROCKWALL State: TX Zip: 75032**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**7 Number of Comments4 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
Freeman, Kris	254-727-0435	kfreeman@31operating.com	
Ikenouye, Teri		teri.ikenouye@state.co.us	
Rosenberg, Kelly		kelly.rosenberg@state.co.us	
Ferrin, Jeremy		jeremy.ferrin@state.co.us	
Thompson, Bud		BLThomps@BLM.gov	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
230956	WELL	SI	10/01/2019	GW	103-08625	C & K 2-24	SI

General Comment:

A routine inspection identified the following compliance issues:

- 1) Report past due monthly operations on Form 7. Complete by 7-15-2020.
- 2) Provide bradenhead access. Photos 1, 2. Complete by 2-1-2021.
- 3) Stormwater channel at lease road location entrance. Photo 7. Complete by 2-1-2021.
- 4) Gas leak at well. Photos 2, 3. Complete by 2-1-2021.

This is a summary of inspection report 700404758.

LocationOverall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 911

Corrective Action: _____ Date: _____

Overall Good: ☒

Spills:					
Type	Area	Volume			

In Containment: No

Comment: _____

☐ Multiple Spills and Releases?

Fencing/:			
Type	PIT		
Comment:			
Corrective Action:		Date:	

Equipment:			corrective date
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:	Last meter calibration June 2019.		
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:	Bradenhead access is not present.		
Corrective Action:	Provide bradenhead access with appropriate fittings to allow determination of pressure and fluid flow.	Date:	02/01/2021

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			
Corrective Action:		Date:	

Inspected FacilitiesFacility ID: 230956 Type: WELL API Number: 103-08625 Status: SI Insp. Status: SI**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: _____

Comment:

Last reported monthly operations were for May 2020. Report past due monthly operations. Last recorded production September 2019.

No audible gas flow at well or meter building. Valve closed at well. Tubing pressure 0 psi. No casing gage present.

Corrective Action: Submit required Form 7(s) to COGCC.

Date: 07/15/2020

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Berms		Other	Fail			

Comment: Storm water channel going from lease road to location.

Corrective Action: Install or repair required BMPs per Rule 1002.f.

Date: 02/01/2021

Pits: ☐ NO SURFACE INDICATION OF PIT

Type: Blowdown Lined: NO Pit ID: Lat: Long:

Reference Point: Other: Length: Width:

Lining:

Liner Type: Liner Condition:

Comment:

Corrective

Date:

Fencing:

Fencing Type: Wildlife Fencing Condition: Adequate

Comment:

Corrective

Date:

Netting:

Netting Type: Netting Condition:

Comment:

Corrective

Date:

Anchor Trench Present: Oil Accumulation: NO 2+ feet Freeboard: YES

Comment:

Corrective

Date:

Optical Gas Imaging SurveySurvey Type: RoutineCurrent Operations: ☐ Production ☐ Workover ☐ Flowback ☐ Referred to APCD

GPS(entrance of location): Lat: _____ Long: _____

Wind: Calm Speed: _____ (mph) Direction From: _____ Weather: _____ Temperature: (F)

Assisting Staff: _____ Camera #: _____

☐ Visible Smoke ☐ Referred to CDPHE

Times Surveyed

Equipment Surveyed

Time Survey Start	AM/PM	Time Survey End	AM/PM	Equipment
10:25	AM	10:30	AM	Wellhead(s)

Comment: FLIR camera used to capture video of gas leaking at well. Gas odor detected by inspector.Corrective Action: Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition.Date: 02/01/2021**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
700404759	inspection photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5320160
700404760	FLIR video of well gas leak	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5320161