

**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:

01/06/2021

Submitted Date:

01/07/2021

Document Number:

700404866

FIELD INSPECTION FORM

Loc ID 315702 Inspector Name: Moran, Rick On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

OGCC Operator Number: 10384
Name of Operator: GENESIS GAS & OIL COLORADO LLC
Address: 900 NE LOOP 410 STE D211
City: SAN ANTONIO State: TX Zip: 78209

Findings:

- 10 Number of Comments
- 4 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
Kimmel, March	210-363-2859	mkimmel@genesishgoco.com	
Heil, John		john.heil@state.co.us	
Pesicka, Conor		conor.pesicka@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
231394	WELL	PR	06/01/2020	OW	103-09064	MOORE 4-11 MH	PR

General Comment:

- A routine inspection identified the following compliance issues:
- 1) Gas venting along edges of tank hatch. Photo 5. Complete by 1-8-2021.
 - 2) Battery & tank signs have old operator name & phone number. Photos 7, 8. Complete by 4-7-2021.
 - 3) Tank label incomplete. Photo 8. Complete by 4-7-2021.
 - 4) Report past due monthly operations on Form 7. Complete by 11-15-2020.

This is a summary of inspection report 700404866.

Location

Overall Good:

Signs/Marker:			
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:	Tank label incomplete.		
Corrective Action:	Install sign to comply with Rule 210.d.	Date:	04/07/2021
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	CONTAINERS		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:			
Comment:	Tank & battery signs have prior operator name & phone number.		
Corrective Action:	Install sign to comply with Rule 210.e.		Date: 04/07/2021

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:			
Type	TANK BATTERY		
Comment:			
Corrective Action:		Date:	
Type	PUMP JACK		
Comment:			
Corrective Action:		Date:	
Type	PIT		
Comment:			
Corrective Action:		Date:	

Equipment:			corrective date
Type: Ancillary equipment	# 2		
Comment:	Fuel / lubricant containers.		
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		

Comment:			
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:	Bradenhead access.		
Corrective Action:		Date:	
Type: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	1	300 BBLs	STEEL AST		
Comment:	FLIR camera used to determine 4' of fluid are in the tank. Tank has audible sound of bubbling occurring inside.				
Corrective Action:					Date:

Paint

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

Berms

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

Venting:

Yes/No		
Comment:	Gas venting out tank pipe. See FLIR video.	
Corrective Action:		Date:

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 231394 Type: WELL API Number: 103-09064 Status: PR Insp. Status: PR

Producing Well

Comment: Pump jack idle at time of inspection. Last reported monthly operations were for September 2020.

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

Date: 11/15/2020

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						

Comment: 12" of snow on ground.

Corrective Action:

Date: _____

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 Action

Date:

Fencing:

Fencing Type: Wildlife Fencing Condition: Adequate

Comment:

Corrective Action

Date:

Netting:

Netting Type: Netting Condition:

Comment:

Corrective Action

Date:

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

Comment:

Corrective Action

Date:

