

**FORM
INSP**

Rev
X/20

**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:

05/07/2021

Submitted Date:

05/11/2021

Document Number:

701500658

FIELD INSPECTION FORM

Loc ID 315263 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: 10654
Name of Operator: LASSO OIL & GAS LLC
Address: 3021 RIDGE RD #156
City: ROCKWALL State: TX Zip: 75032

Findings:

- 10 Number of Comments
- 2 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
COGCC, Engineering	303-894-2100	dnr_cogccEngineering@state.co.us	
Thompson, Bud		BLThomps@BLM.gov	
Ikenouye, Teri		teri.ikenouye@state.co.us	
Rosenberg, Kelly		kelly.rosenberg@state.co.us	
Freeman, Kris	254-717-0435	kfreeman@31operating.com	
Heil, John		john.heil@state.co.us	
Boulger, Levin		lboulger@31operating.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
230519	WELL	PR	04/01/2019	GW	103-08186	CONTINENTAL 2-28	PR

General Comment:

- A follow up inspection of documents:
1) FIR 700404725 dated 12-22-2020.
- The following compliance issues were resolved:
1) Emergency number is available.
- The following were partially completed:
1) Past due monthly operations were updated to December 2020.
- The following compliance issues are uncompleted:
1) Provide bradenhead access.
2) Calibrate gas meter.

Location

Overall Good:

Signs/Marker:

Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	OTHER		
Comment:	Sign at meter building.		
Corrective Action:		Date:	

Emergency Contact Number:

Comment:	911	
Corrective Action:		Date: _____

Overall Good:

Spills:

Type	Area	Volume		
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In Containment: No

Comment: _____

Multiple Spills and Releases?

Fencing/:

Type	PIT		
Comment:			
Corrective Action:		Date:	

Equipment:

Type	Quantity	Comment	Corrective Action	Date	corrective date
Horizontal Heated Separator	# 1				
		Comment:			
		Corrective Action:		Date:	
Bradenhead	# 1				
		Comment: Bradenhead access not present.			
		Corrective Action: Install appropriate fittings to allow bradenhead visual inspection as per Rule 419.a.(1), (2).		Date: 02/01/2021	
Deadman # & Marked	# 3				
		Comment:			
		Corrective Action:		Date:	
Gas Meter Run	# 1				
		Comment: Most recent meter calibration in June 2018.			
		Corrective Action: Calibrate gas metering equipment annually to comply with rule 430.d.(1).		Date: 02/01/2021	
Bird Protectors	# 1				
		Comment:			
		Corrective Action:		Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 230519 Type: WELL API Number: 103-08186 Status: PR Insp. Status: PR

Producing Well

Comment: [Most recent reported monthly operations is for December 2020 with production in December 2020.](#)
[Report past due monthly operations by submitting required Form 7\(s\) to COGCC per rule 413.a.](#)

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
Other						Vegetation.
Berms						

Comment: No significant soil migration, erosion or soil movement on location.

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: Well pit.

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: _____

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

Reference Point: _____ Other: _____ Length: _____ Width: _____

Lining:

Liner Type: _____ Liner Condition: _____

Comment: Separator pit.

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: <u>NO</u>	2+ feet Freeboard: <u>YES</u>
Comment:		
Corrective		Date:

Attached Documents

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

Document Num	Description	URL
402685263	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5425383
701500660	inspection photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5425375