

**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:

06/30/2021

Submitted Date:

06/30/2021

Document Number:

697004008

**FIELD INSPECTION FORM**Loc ID 417469 Inspector Name: Peterson, Tom On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**

OGCC Operator Number: 52530

Name of Operator: MAGPIE OPERATING INC

Address: 2707 SOUTH COUNTY RD 11

City: LOVELAND State: CO Zip: 80537

**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**

8 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 |
|--------------|--------------|--------------------------|---------|
| Warner, Ross |              | ross.magpieoil@gmail.com |         |
| Warner, Ryan | 970-669-6308 | magpieoil@yahoo.com      |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 417432      | WELL | SI     | 08/01/2020  | OW         | 069-06404 | Vader 33-15   | SI          |

**General Comment:**

**Location**Overall Good: ☒**Signs/Marker:**

|                    |                      |       |  |
|--------------------|----------------------|-------|--|
| Type               | TANK LABELS/PLACARDS |       |  |
| Comment:           |                      |       |  |
| Corrective Action: |                      | Date: |  |
| Type               | BATTERY              |       |  |
| Comment:           |                      |       |  |
| Corrective Action: |                      | Date: |  |

Emergency Contact Number:

|                    |  |             |
|--------------------|--|-------------|
| Comment:           |  |             |
| Corrective Action: |  | Date: _____ |

Overall Good: ☒**Spills:**

|      |      |        |  |  |
|------|------|--------|--|--|
| Type | Area | Volume |  |  |
|------|------|--------|--|--|

In Containment: No

Comment: ☐ Multiple Spills and Releases?**Fencing/:**

|                    |              |       |  |
|--------------------|--------------|-------|--|
| Type               | SEPARATOR    |       |  |
| Comment:           | Panel        |       |  |
| Corrective Action: |              | Date: |  |
| Type               | WELLHEAD     |       |  |
| Comment:           | Pipe fencing |       |  |
| Corrective Action: |              | Date: |  |
| Type               | TANK BATTERY |       |  |
| Comment:           | Panel        |       |  |
| Corrective Action: |              | Date: |  |

**Equipment:**

|                               |   |       |                 |
|-------------------------------|---|-------|-----------------|
|                               |   |       | corrective date |
| Type: Emission Control Device | # 1   |       |                 |
| Comment:                      |   |       |                 |
| Corrective Action:            |   | Date: |                 |
| Type: Plunger Lift            | # 1   |       |                 |
| Comment:                      |   |       |                 |
| Corrective Action:            |   | Date: |                 |
| Type: Gas Meter Run           | # 1   |       |                 |
| Comment:                      | Calibration card is outdated. See attached photo. |       |                 |
| Corrective Action:            | Measure gas per Rule 430.                         | Date: | 10/01/2021      |
| Type: Bird Protectors         | # 3   |       |                 |

|                           |   |       |  |
|---------------------------|---|-------|--|
| Comment:                  |   | Date: |  |
| Corrective Action:        |   | Date: |  |
| Type: Bradenhead          | # 1                                     |       |  |
| Comment:                  | Bradenhead valve is exposed at surface. | Date: |  |
| Corrective Action:        |   | Date: |  |
| Type: Pig Station         | # 1                                     |       |  |
| Comment:                  |   | Date: |  |
| Corrective Action:        |   | Date: |  |
| Type: Ancillary equipment | # 1                                     |       |  |
| Comment:                  | Disconnected tank heater                | Date: |  |
| Corrective Action:        |   | Date: |  |
| Type: Flow Line           | # 1                                     |       |  |
| Comment:                  |   | Date: |  |
| Corrective Action:        |   | Date: |  |

**Tanks and Berms:**

| Contents           | #                                | Capacity | Type           | Tank ID | SE GPS |
|--------------------|----------------------------------|----------|----------------|---------|--------|
| PRODUCED WATER     | 1                                | 100 BBLS | PBV FIBERGLASS |         | ,      |
| Comment:           | Produced water tank is anchored. |          |                |         |        |
| Corrective Action: |                                  |          |                |         | Date:  |

**Paint**

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

**Berms**

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

| Contents           | # | Capacity | Type      | Tank ID | SE GPS |
|--------------------|---|----------|-----------|---------|--------|
| CRUDE OIL          | 2 | 300 BBLS | STEEL AST |         | ,      |
| Comment:           |   |          |           |         |        |
| Corrective Action: |   |          |           |         | Date:  |

**Paint**

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

**Berms**

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|------|----------|---------------------|---------------------|-------------|
|------|----------|---------------------|---------------------|-------------|

Inspector Name: Peterson, Tom

|                    |          |                  |                 |          |       |
|--------------------|----------|------------------|-----------------|----------|-------|
| Earth              | Adequate | Walls Sufficient | Base Sufficient | Adequate |       |
| Comment:           |          |                  |                 |          |       |
| Corrective Action: |          |                  |                 |          | Date: |

**Venting:**

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

**Flaring:**

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

**Inspected Facilities**Facility ID: 417432 Type: WELL API Number: 069-06404 Status: SI Insp. Status: SI**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

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

**BradenHead**Date of Last Brhd Test: 06/23/2020Annual Brhd Completed? NoLast Brhd Test Results Initial Surf Csg Pressure: 45

Fluid Type: \_\_\_\_\_

End Surf Csg Pressure: 1

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel           | Pass            | Gravel                  | Pass                  |               |                          |         |

Comment: Corrective Action: Date: **Pits:** ☐ NO SURFACE INDICATION OF PIT**COGCC Comments**

| Comment   | User      | Date       |
|---|-----------|------------|
| <p><a href="#">COGCC Inspection Report Summary</a><br/> On Wednesday 6/30/2021 at approximately 12:50 hours, I, Inspector Tom Peterson, conducted an on-site inspection at the Magpie Operating Vader 33-15 location #417469 in Larimer County, Colorado.<br/> While there, I observed that the DCP gas sales meter calibration card was outdated. During this inspection the following possible compliance issues were observed: Rule 430. with a corrective action date of 10/1/2021.<br/> A follow up on this site inspection needs to be conducted to ensure the compliance issues have been corrected to comply with COGCC rules.<br/> This is a summary of the inspection report.</p> | petersont | 06/30/2021 |

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

| Document Num | Description | URL   |
|--------------|-------------|---|
| 697004009    | Photos      | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5468692">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5468692</a> |