

**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:

07/01/2021

Submitted Date:

07/07/2021

Document Number:

688310766**FIELD INSPECTION FORM**Loc ID 317064 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 24500Name of Operator: PADCO LLCAddress: 800 W 6TH STREET SUITE 1010City: LOS ANGELES State: CA Zip: 90017**Status Summary:**

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

Findings:14 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
Richmond, Dan	(918) 630-9912	dan@dsrinc.net	Field Operations Manager
Crumley, Tim	(970) 768-5658	tcrumley@tcrumleypumpingse vice.com	Pumper

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
235600	WELL	PR	08/01/2018	OW	121-08090	HARPHAM 3	PR

General Comment:Routine Inspection

Control kochia weeds at well and tank battery locations that are both in a crop field, gas return line on back side of engine shed need LO/TO, there is an opening on top of southern produced water tank that needs a bird protector and there is a valve leak on the back side of the tanks. See attached photos.

LocationOverall Good: ☒

Signs/Marker:			
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	CONTAINERS		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 970-768-5659

Corrective Action:

Date: _____

Good Housekeeping:

Type	WEEDS		
Comment:	Control weeds.		
Corrective Action:	Comply with Rule 606.	Date:	07/15/2021

Overall Good: ☐

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

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

Type	PUMP JACK		
Comment:			
Corrective Action:		Date:	

Equipment:

			corrective date
Type: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:	Form 17 is required to be completed and submitted annually.		
Corrective Action:		Date:	

Type: Prime Mover	# 1	
Comment:	electric	
Corrective Action:		Date:
Type: Bird Protectors	# 1	
Comment:	one needed on south produced water tank	
Corrective Action:		Date:
Type: Vertical Heater Treater	# 1	
Comment:	shed, bermed, propane	
Corrective Action:		Date:
Type: Deadman # & Marked	# 4	
Comment:		
Corrective Action:		Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	2	300 BBLS	STEEL AST		,
Comment:					
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:	same earth berms as oil tanks			
Corrective Action:				Date:

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

Paint

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

Berms

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

Corrective Action:		Date:	
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Wells Served By Facilities Above**AirsID**

API Number
121-08090

API Number	AirsID
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Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Location Construction

Location ID: 235600 CDP: _____

Comment: _____

Corrective Action: _____

Date: _____

Form 2A COAs:

Comment: No COAs.

Corrective Action: _____

Date: _____

Wildlife BMPs:

Comment: _____

Corrective Action: _____

Date: _____

Comment: _____

Corrective Action: _____

Date: _____

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____

Address: _____

Phone Number: _____

Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____

Phone Number: _____

Date Onsite Request Received: _____

Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____

Phone Number: _____

Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Inspected Facilities									
Facility ID:	235600	Type:	WELL	API Number:	121-08090	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	PR 4/1/2021 production reported to COGCC database.								
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
Compaction	Pass	Compaction	Pass	Material Handling And Spill Prevention	Pass	
Gravel	Pass	Gravel	Pass			

Comment: _____

Corrective Action: _____

Date: _____

Pits: ☐ NO SURFACE INDICATION OF PITType: Produced WaterLined: NO

Pit ID: _____

Lat: _____

Long: _____

Reference Point: _____

Other: _____

Length: _____

Width: _____

Lining:

Liner Type: _____

Liner Condition: _____

Comment: _____

Corrective Action _____

Date: _____

Fencing:Fencing Type: None

Fencing Condition: _____

Comment: in crop field

Corrective Action _____

Date: _____

Netting:

Netting Type: _____

Netting Condition: _____

Comment: _____

Corrective Action _____

Date: _____

Anchor Trench Present: _____

Oil Accumulation: NO2+ feet Freeboard: YES

Comment: _____

Corrective Action _____

Date: _____

Type: Produced WaterLined: NO

Pit ID: _____

Lat: _____

Long: _____

Reference Point: _____

Other: _____

Length: _____

Width: _____

Lining:

Liner Type: _____

Liner Condition: _____

Comment: _____

Corrective Action _____

Date: _____

Fencing:Fencing Type: None

Fencing Condition: _____

Comment: in crop field

Corrective Action _____

Date: _____

Netting:

Netting Type: _____

Netting Condition: _____

Inspector Name: Sherman, Susan

Comment:		Date:
Corrective Action		
Anchor Trench Present:	Oil Accumulation: <u>NO</u>	2+ feet Freeboard: <u>YES</u>
Comment:		Date:
Corrective Action		

Attached Documents

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

Document Num	Description	URL
688310804	PADCO Harpham 3	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5472996