

**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:

07/08/2021

Submitted Date:

07/08/2021

Document Number:

699502990**FIELD INSPECTION FORM**Loc ID 319648 Inspector Name: MEDINA, JUSTIN On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 10711Name of Operator: PAINTED PEGASUS PETROLEUM LLCAddress: 16820 BARKER SPRINGS RD #521City: HOUSTON State: TX Zip: 77084**Status Summary:**

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

Findings:3 Number of Comments0 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
Morgan, John		john.morgan@state.co.us	
		jh@p3petro.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
200691	WELL	SI	09/01/1990	ERIW	001-06094	UPRR-SANDEN-EHN 1-17	SI

General Comment:

LocationOverall Good: ☒

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Good Housekeeping:

Type

WEEDS

Comment:

Weeds need to be controlled.

Corrective Action:

Date:

Overall Good: ☐**Spills:**

Type

Area

Volume

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Equipment:**

corrective date

Type: Ancillary equipment

1

Comment:

electric

Corrective Action:

Date:

Type: Bradenhead

1

Comment:

Corrective Action:

Date:

Venting:

Yes/No

NO

Comment:

Corrective Action:

Date:

Flaring:

Type

Comment:

Corrective Action:

Date:

Inspected FacilitiesFacility ID: 200691 Type: WELL API Number: 001-06094 Status: SI Insp. Status: SI**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: DSND

TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 06/24/2014

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: GRAVITY FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

BradenHeadDate of Last Brhd Test: 06/26/2019 Annual Brhd Completed? YesLast Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: _____End Surf Csg Pressure: 0

Comment: _____

Corrective Action: _____ Date: _____

COGCC Comments

Comment	User	Date
This well is part of a ongoing NOAV investigation. All previous corrective actions are still active At time of inspection weather conditions were overcast, warm, calm.	medinaj	07/08/2021

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

Document Num	Description	URL
699502991	pics	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5475601