

**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:

08/26/2021

Submitted Date:

08/27/2021

Document Number:

694500367**FIELD INSPECTION FORM**Loc ID 312916 Inspector Name: NEIDEL, KRIS On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 10409Name of Operator: PEAKVIEW OPERATING COMPANY LLCAddress: 1001 17TH ST SUITE 1050City: DENVER State: CO Zip: 80202**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**2 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
Wise, Wayne		wwise@peakviewenergy.com	
Fischer, Alex		alex.fischer@state.co.us	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
222829	WELL	PR	05/17/1973	OW	081-06189	VOLOSHIN-MORTON 1 (-8)	EI

**General Comment:**

**Location**Overall Good: ☐

Emergency Contact Number:

Comment: Corrective Action: Date: Overall Good: ☐**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS	
CRUDE OIL	2	400 BBLs	STEEL AST		,	
Comment:	<input type="text"/>					
Corrective Action:	<input type="text"/>				Date:	<input type="text"/>

**Paint**

Condition	Adequate	<input type="text"/>
Other (Content)	<input type="text"/>	
Other (Capacity)	<input type="text"/>	
Other (Type)	<input type="text"/>	

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient		Inadequate
Comment:	Surface production line is burred taking up secondary containment volume. Some of the berms may have eroded or settled.			
Corrective Action:	Assure that tank secondary containment is adequate per 603.o. evaluate capacity and permeability of secondary containment.			Date: 11/03/2021

**Venting:**

Yes/No	<input type="text"/>	
Comment:	<input type="text"/>	
Corrective Action:	<input type="text"/>	Date: <input type="text"/>

**Flaring:**

Type	<input type="text"/>	
Comment:	<input type="text"/>	
Corrective Action:	<input type="text"/>	Date: <input type="text"/>

**Location Construction**

Location ID: 222829 CDP: \_\_\_\_\_

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

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

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

**Form 2A COAs:**

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

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: 222829 Type: WELL API Number: 081-06189 Status: PR Insp. Status: EI**Producing Well**Comment: well was pumping at time of inspection.

Corrective Action:

Date:

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

Document Num	Description	URL
694500368	photo	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5517753">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5517753</a>