

**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:

09/10/2021

Submitted Date:

09/15/2021

Document Number:

689806354

FIELD INSPECTION FORMLoc ID 313417 Inspector Name: Waldron, Emily On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**

OGCC Operator Number: 10407

Name of Operator: ANTLER ENERGY LLC

Address: PO BOX 104

City: BAGGS State: WY Zip: 82321

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

6 Number of Comments

3 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
		dnr_cogccengineering@state.co.us	
Evans, Clay		antlerenergy@yahoo.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
300984	WELL	PR	09/01/2018	GW	081-07461	CHEROKEE RIDGE 14-34R	PR

General Comment:

Routine FIU inspection. Compliance issues observed:
 no bradenhead access apparent
 annual weeds on location
 accuracy in production reporting

LocationOverall Good: ☐**Signs/Marker:**

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

Emergency Contact Number:

Comment: 307-380-7616

Corrective Action:

Date: _____

Good Housekeeping:

Type	WEEDS		
Comment:	Annual weeds on location.		
Corrective Action:	Comply with Rule 606.	Date:	09/22/2021

Overall Good: ☐**Spills:**

Type	Area	Volume		
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In Containment: No

Comment:

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

Type: Bird Protectors	#		corrective date
Comment:			
Corrective Action:		Date:	
Type: Horizontal Heater Treater	# 1		
Comment:			
Corrective Action:		Date:	
Type: Dehydrator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bradenhead	#		
Comment:	Bradenhead inaccessible or not visible.		
Corrective Action:	Install appropriate fittings to allow bradenhead visual inspection as per Rule 419.a.(1), (2).	Date:	09/27/2021

Inspector Name: Waldron, Emily

Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:			Date:
Type: Horizontal Separator	# 1		
Comment:			
Corrective Action:			Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	2	400 BBLs	STEEL AST		,	
Comment:						
Corrective Action:						Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate			Adequate
Comment:				
Corrective Action:				Date:

Venting:

Yes/No		
Comment:		
Corrective Action:		Date:

Flaring:

Type	
Comment:	
Corrective Action:	Date:

Inspected FacilitiesFacility ID: 300984 Type: WELL API Number: 081-07461 Status: PR Insp. Status: PR**Producing Well**Comment: Produced volumes are required to be reported accurately from the wellhead meter every month, and the form 7 reporting does not reflect that accurate measurement.Corrective Action: Submit required Form 7(s) to COGCC per rule 413.Date: 10/15/2021

Reclamation - Storm Water - Pit**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Berms						
Gravel						
Compaction						

Comment: Corrective Action: Date: **Pits:** ☐ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
689806355	Inspection Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5532559