

**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:

10/14/2021

Submitted Date:

10/26/2021

Document Number:

688311368

FIELD INSPECTION FORMLoc ID 387137 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**

OGCC Operator Number: 96340

Name of Operator: WIEPKING-FULLERTON ENERGY LLC

Address: 106 GLENMOOR LN

City: ENGLEWOOD State: CO Zip: 80113

Status Summary:

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

Findings:

13 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
Halde, Kerry	(719) 340-0329	haldeoil@hotmail.com	All Inspections
Shalberg, Greg	(719) 688-3547	gregshalberg@aol.com	
Boone, Linda	(720) 271-8605	LDBoonePar@aol.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
218264	WELL	PR	02/01/2021	OW	073-06249	STATE MONK 23-6#1	PR

General Comment:

Routine Field Inspection

Stained soil at wellhead (see attached photo).

LocationOverall Good: ☒**Signs/Marker:**

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

Emergency Contact Number:

Comment:	719-340-0329	Date:	
Corrective Action:		Date:	

Good Housekeeping:

Type	OTHER		
Comment:	location and access road are mowed		
Corrective Action:		Date:	

Overall Good: ☐**Spills:**

Type	Area	Volume		
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In Containment: No

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

Type	PUMP JACK		
Comment:			
Corrective Action:		Date:	
Type	SEPARATOR		
Comment:			
Corrective Action:		Date:	
Type	TANK BATTERY		
Comment:			
Corrective Action:		Date:	

Equipment:

Type: Prime Mover	# 1		corrective date
Comment:	gas engine, propane		
Corrective Action:		Date:	

Type: Vertical Heater Treater	# 1	
Comment:	bermed, shed	
Corrective Action:		Date:
Type: Bradenhead	# 1	
Comment:	No 2021 Form 17 is in COGCC database yet.	
Corrective Action:		Date:
Type: Pump Jack	# 1	
Comment:	Stuffing box leak at wellhead (see attached photo).	
Corrective Action:	Securely fasten all valves, pipes, fittings, and Production Facilities to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 608.e.	Date: 11/29/2021
Type: Deadman # & Marked	# 4	
Comment:		
Corrective Action:		Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	1	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	
Earth	Adequate				
Comment:					
Corrective Action:				Date:	
Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	300 BBLS	FIBERGLASS AST		,
Comment:					
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Inspector Name: Sherman, Susan

Comment:	same earth berms as crude oil tank				
Corrective Action:				Date:	

Wells Served By Facilities Above

AirsID

API Number

API Number

AirsID

073-06249

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Location Construction

Location ID: 218264 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:	218264	Type:	WELL	API Number:	073-06249	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	pr 8/1/2021 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	In Process			
Gravel	Pass	Gravel	Pass			

Comment: [Access road is rutted.](#)

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
688311436	Wiepking-Fullerton State Monk 23-6#1	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5564958