

**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:

12/01/2021

Submitted Date:

12/02/2021

Document Number:

700703610

**FIELD INSPECTION FORM**Loc ID 324144 Inspector Name: Ramsey, Scott On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**

OGCC Operator Number: 10550

Name of Operator: MUSTANG RESOURCES LLC

Address: 1660 LINCOLN STREET SUITE 1450

City: DENVER State: CO Zip: 80264

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

7 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            |
|--------------|--------------|---------------------------------|--------------------|
| , mustang    | 303-807-5112 | dlemon@mustangresourcesllc.com  | regulatory manager |
| , Mustang    |              | bcoutts@mustangresourcesllc.com |                    |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name     | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-------------------|-------------|
| 259159      | WELL | PR     | 12/01/2016  | GW         | 045-07696 | BURNS 9-35-6-94 W | PR          |

**General Comment:****COGCC Inspection Report Summary**

On Wednesday 12/1/2021 at approximately 1100, I, Inspector Scott Ramsey, conducted a routine inspection at Mustang Burns 9-35-6-94, at Location # 324144 in Garfield county Colorado.

While there, I observed normal production operations. All meters have been calibrated on location within the past year. This location is within or in close proximity to a CPW Density/High Priority Habitat, black bear, NSO habitat, Wildlife Management Area.

During this inspection the following compliance issues were observed:

1. Lack of battery signage
2. One dead man not marked properly
3. Horizontal separator includes 1 glycol storage tank, storage vessels contains no labeling to specify capacity or chemical hazard information.

Refer to photograph of observed compliance issue.

A follow up on this site inspection will be conducted to ensure the compliance issues have been corrected to comply with COGCC rules. This is a summary of inspection report.

| Location   |   |        |                  |
|--|---|--------|------------------|
| <b>Lease Road:</b>                                     |   |        |                  |
| Type   | Access  |        |                  |
| comment:   |   |        |                  |
| Corrective Action                                      | L   |        | Date:            |
| Overall Good: <input type="checkbox"/>                 |   |        |                  |
| <b>Signs/Marker:</b>                                   |   |        |                  |
| Type   | OTHER   |        |                  |
| Comment:   | Horizontal separator includes 1 glycol storage tank, storage vessels contains no labeling to specify capacity or chemical hazard information. |        |                  |
| Corrective Action:                                     | Provide proper labeling   |        | Date: 02/02/2022 |
| Type   | TANK LABELS/PLACARDS  |        |                  |
| Comment:   |   |        |                  |
| Corrective Action:                                     |   |        | Date:            |
| Type   | BATTERY   |        |                  |
| Comment:   | Lack of battery signage   |        |                  |
| Corrective Action:                                     | Comply with rule 605.e  |        | Date: 02/02/2022 |
| Type   | WELLHEAD  |        |                  |
| Comment:   |   |        |                  |
| Corrective Action:                                     |   |        | Date:            |
| Emergency Contact Number:                              |   |        |                  |
| Comment:   | 911   |        |                  |
| Corrective Action:                                     |   |        | Date: _____      |
| <b>Good Housekeeping:</b>                              |   |        |                  |
| Type   | DEBRIS  |        |                  |
| Comment:   |   |        |                  |
| Corrective Action:                                     |   |        | Date:            |
| Overall Good: <input checked="" type="checkbox"/>      |   |        |                  |
| <b>Spills:</b>   |   |        |                  |
| Type   | Area  | Volume |                  |
| In Containment: No                                     |   |        |                  |
| Comment:   |   |        |                  |
| <input type="checkbox"/> Multiple Spills and Releases? |   |        |                  |
| <b>Equipment:</b>                                      |   |        |                  |
| Type: Deadman # & Marked                               | # 4   |        | corrective date  |
| Comment:   | One dead man not marked properly  |        |                  |
| Corrective Action:                                     | Mark or remove dead man   |        | Date: 01/07/2022 |
| Type: Horizontal Heated Separator                      | # 1   |        |                  |
| Comment:   |   |        |                  |
| Corrective Action:                                     |   |        | Date:            |

|                       |     |  |       |
|-----------------------|-----|--|-------|
| Type: Plunger Lift    | # 1 |  |       |
| Comment:              |     |  |       |
| Corrective Action:    |     |  | Date: |
| Type: Bradenhead      | # 1 |  |       |
| Comment:              |     |  |       |
| Corrective Action:    |     |  | Date: |
| Type: Bird Protectors | # 1 |  |       |
| Comment:              |     |  |       |
| Corrective Action:    |     |  | Date: |

**Tanks and Berms:**

|                    |   |           |           |         |        |       |
|--------------------|---|-----------|-----------|---------|--------|-------|
| Contents           | # | Capacity  | Type      | Tank ID | SE GPS |       |
| PRODUCED WATER     | 1 | <100 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              |          |                     |                     |             |
| Comment:           |          |                     |                     |             |
| Corrective Action: |          |                     |                     |             |
|                    |          |                     |                     | Date:       |

**Venting:**

|                    |    |  |       |
|--------------------|----|--|-------|
| Yes/No             | NO |  |       |
| Comment:           |    |  |       |
| Corrective Action: |    |  | Date: |

**Flaring:**

|                    |  |       |
|--------------------|--|-------|
| Type               |  |       |
| Comment:           |  |       |
| Corrective Action: |  | Date: |

| Inspected Facilities |           |       |      |             |           |         |    |               |    |
|----------------------|-----------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID:         | 259159    | Type: | WELL | API Number: | 045-07696 | Status: | PR | Insp. Status: | PR |
| Producing Well       |           |       |      |             |           |         |    |               |    |
| Comment:             | Producing |       |      |             |           |         |    |               |    |
| 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Berms            |                 |                         |                       |               |                          |         |
|                  |                 | Ditches                 |                       |               |                          |         |

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   |
|--------------|-------------|---|
| 700703614    | Photo log   | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5594266">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5594266</a> |