

FORM
INSPRev
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:

01/31/2022

Submitted Date:

01/31/2022

Document Number:

693506323

FIELD INSPECTION FORM

Loc ID 307292 Inspector Name: Silver, Randy On-Site Inspection 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10758Name of Operator: OGRIS OPERATING LLCAddress: PO BOX 53467City: MIDLAND State: TX Zip: 79710**Status Summary:**

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

Findings:5 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
		gward@ogrisop.com	
		gward@ogrisop.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
217394	WELL	PR	02/06/2009	GW	071-06170	APACHE CANYON 12-5	PR

General Comment:

Location

Overall Good:

Signs/Marker:

	Type WELLHEAD		
	Comment: Adequate		
Corrective Action:		Date:	

Emergency Contact Number:

Comment:	<input style="width: 95%;" type="text"/>		
Corrective Action:	<input style="width: 95%;" type="text"/>	Date:	<input style="width: 80%;" type="text"/>

Overall Good:

Spills:

Type	Area	Volume			

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:

	Type		
	Comment:		
Corrective Action:		Date:	

Equipment:

	Type	#			corrective date
Type: Vertical Separator		# 1			
Comment:					
Corrective Action:					Date:
Type: Gas Meter Run		# 1			
Comment:					
Corrective Action:					Date:
Type: Bradenhead		# 1			
Comment:					
Corrective Action:					Date:
Type: Pump Jack		# 1			
Comment:					
Corrective Action:					Date:
Type: Compressor		# 1			
Comment:					
Corrective Action:					Date:
Type: Deadman # & Marked		# 4			
Comment:					
Corrective Action:					Date:
Type: Ancillary equipment		# 1			

Comment: Electric panel		Date:
Corrective Action:		Date:
Type: Prime Mover	# 1	
Comment: Electric motor		Date:
Corrective Action:		Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	OTHER	STEEL AST		
Comment:					
Corrective Action:					Date:

Paint

Condition	
Other (Content)	
Other (Capacity)	30bbl
Other (Type)	

Berms

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

Venting:

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

Flaring:

Type	
Comment:	
Corrective Action:	Date:

Inspected Facilities

Facility ID: 217394 Type: WELL API Number: 071-06170 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Corrective Action:

Date:

BradenHead

Date of Last Brhd Test: 02/10/2020 Annual Brhd Completed? Yes

Last Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: _____

End Surf Csg Pressure: 0

Comment:

Corrective Action:

Date:

COGCC Comments

Comment	User	Date
Routine inpection	silverr	01/31/2022

Attached Documents

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

Document Num	Description	URL
693506324	loc pic	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5650705