

**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:

02/14/2022

Submitted Date:

02/14/2022

Document Number:

699804148**FIELD INSPECTION FORM**Loc ID 324157 Inspector Name: De Paolo, Corey On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 96850Name of Operator: TEP ROCKY MOUNTAIN LLCAddress: PO BOX 370City: PARACHUTE State: CO Zip: 81635**Status Summary:**

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

Findings:11 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 |
|--------------|-------|------------------------------------|---------|
| , TEP | | COGCCInspectionReports@terraep.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 259586 | WELL | PR | 03/21/2001 | GW | 045-07756 | GM 31-34 | PR |

General Comment:**COGCC Inspection Report Summary**

On Monday 2/14/22 at approximately 11:00 hours, I, Inspector Corey De Paolo, Conducted an on-site inspection at TEP ROCKY MOUNTAIN LLC GM-66S96W /34NWNE, Location #324157 in Garfield County Colorado. While there, I observed normal production operations. This is a summary of inspection report.

LocationOverall Good: ☒

| | | | |
|----------------------|----------------------|-------|--|
| Signs/Marker: | | | |
| Type | BATTERY | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

Comment: 911/970-285-9377

Corrective Action:

Date: _____

Overall Good: ☒

| | | | |
|----------------|------|--------|--|
| Spills: | | | |
| Type | Area | Volume | |

In Containment: No

Comment:

☐ Multiple Spills and Releases?

| | | | |
|--------------------|--------------|-------|--|
| Fencing/: | | | |
| Type | SEPARATOR | | |
| Comment: | Hog panels | | |
| Corrective Action: | | Date: | |
| Type | TANK BATTERY | | |
| Comment: | Hog panels | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | Hog panels | | |
| Corrective Action: | | Date: | |

| | | | |
|---------------------------|--|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Bird Protectors | # 2 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Bradenhead | # 1 | | |
| Comment: | No form of pressure monitoring equipment located on braden heads. All braden head valves are accessible. | | |
| Corrective Action: | | Date: | |
| Type: Ancillary equipment | # 1 | | |

| | | | |
|---|-----|-------|--|
| Comment: Chemcial tank | | | |
| Corrective Action: | | Date: | |
| Type: Horizontal Heated Separator | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Plunger Lift | # 1 | | |
| Comment: Well on plunger lift | | | |
| 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 | |
| Other (Content) | |
| Other (Capacity) 80 bbl | |
| Other (Type) | |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|--------------------|----------|---------------------|---------------------|-------------|
| Metal | Adequate | Walls Sufficent | Base Sufficent | Adequate |
| Comment: | | | | |
| Corrective Action: | | | | Date: |

Venting:

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

Flaring:

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

| | | | | |
|-----------------------------|------------|-----------------------|------------|------------------|
| Inspected Facilities | | | | |
| Facility ID: 259586 | Type: WELL | API Number: 045-07756 | 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Compaction | | | | | | |
| | | Gravel | | | | |
| | | Berms | | | | |
| | | Sediment Traps | | | | |
| | | Check Dams | | | | |
| Berms | | | | | | |
| | | Ditches | | | | |
| | | Culverts | | | | |
| Gravel | | | | | | |
| Ditches | | | | | | |
| Sediment Traps | | | | | | |

Comment: Location appears to have some gravel throughout the location with light compaction. Places with light to no gravel are present on location. Light gravel and light compaction could lead to future stabilization and tracking issues.

Corrective Action:

Date: _____

Pits: ☒ NO SURFACE INDICATION OF PIT

COGCC Comments

| Comment | User | Date |
|--|----------|------------|
| Refer to Storm water for comments. | depaoloc | 02/14/2022 |

Attached Documents

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

| Document Num | Description | URL |
|--------------|-----------------------------|---|
| 699804149 | Photos for Insp. #699804148 | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5667338 |