

**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:

05/10/2022

Submitted Date:

05/10/2022

Document Number:

702400427

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

OGCC Operator Number: 10649

Name of Operator: EWS 4 DJ BASIN LLC

Address: 2015 CLUBHOUSE DR SUITE 201

City: GREELEY State: CO Zip: 80634

Status Summary:

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

Findings:

13 Number of Comments

0 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
Morgan, John		john.morgan@state.co.us	UIC Inspections
Goddard, Jim		jgoddard@expedition-water.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
448843	WELL	IJ	05/01/2017	DSPW	123-44047	EWS 4A	AC
449138	WELL	IJ	08/01/2017	DSPW	123-44167	EWS 4	AC
459195	WELL	IJ	07/01/2019	DSPW	123-48766	EWS 4B	AC

General Comment:

LocationOverall Good: ☒

Signs/Marker:			
Type	CONTAINERS		
Comment:	adequate		
Corrective Action:		Date:	
Type	OTHER		
Comment:	location entrance sign is adequate		
Corrective Action:		Date:	
Type	BATTERY		
Comment:	adequate		
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:	adequate		
Corrective Action:		Date:	

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good: ☒

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	LOCATION		
Comment:	barb wire		
Corrective Action:		Date:	

Equipment:			corrective date
Type: Ancillary equipment	# 15		
Comment:	Electric pumps and 4 Filter Canisters		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	2	OTHER	STEEL AST		,
Comment:	SEPARATES OIL , WATER, AND SAND				
Corrective Action:				Date:	

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)	750	
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Concrete	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Comment:	All tanks share concrete berms				
Corrective Action:					Date:

Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	4	OTHER	STEEL AST		,	
Comment:						
Corrective Action:						Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)	750 bbl	
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Concrete	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Comment:					
Corrective Action:					Date:

Contents	#	Capacity	Type	Tank ID	SE GPS	
CRUDE OIL	5	OTHER	STEEL AST		,	
Comment:						
Corrective Action:						Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)	750 bbl	
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Concrete	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Comment:					
Corrective Action:					Date:

Contents	#	Capacity	Type	Tank ID	SE GPS	
PRODUCED WATER	20	OTHER	STEEL AST		,	
Comment:						

Corrective Action:					Date:	
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Paint

Condition	Adequate				
Other (Content)					
Other (Capacity)	750 bbl				
Other (Type)					

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Concrete	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Comment:					
Corrective Action:					Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected FacilitiesFacility ID: 448843 Type: WELL API Number: 123-44047 Status: IJ Insp. Status: AC**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: DJINJ

TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 03/09/2022

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: routine inspection

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

BradenHeadDate of Last Brhd Test: 12/03/2021 Annual Brhd Completed? YesLast Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: NONEEnd Surf Csg Pressure: 0

Comment: _____

Corrective Action: _____ Date: _____

Facility ID: 449138 Type: WELL API Number: 123-44167 Status: IJ Insp. Status: AC**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: DJINJ

TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 03/10/2022

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: routine inspection

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

BradenHead

Date of Last Brhd Test: 12/03/2021 Annual Brhd Completed? Yes

Last Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: NONE

End Surf Csg Pressure: 0

Comment:

Corrective Action:

Date:

Facility ID: 459195 Type: WELL API Number: 123-48766 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation:

Maximum Injection Pressure:

UIC Routine

Inj./Tube: Pressure or inches of Hg

Previous Test Pressure

MPP

(e.g. 30 psig or -30" Hg)

Inj Zone: DJINJ

TC: Pressure or inches of Hg

Previous Test Pressure

Last MIT: 06/29/2020

Brhd: Pressure or inches of Hg

Previous Test Pressure

AnnMTReq:

Comment: routine inspection

Corrective Action:

Date:

Method of Injection:

Test Type:

Tbg psi:

Csg psi:

BH psi:

Insp. Status:

Comment:

Corrective Action:

Date:

BradenHead

Date of Last Brhd Test: 12/03/2021 Annual Brhd Completed? Yes

Last Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: NONE

End Surf Csg Pressure: 0

Comment:

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
Gravel	Pass	Gravel	Pass			

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**COGCC Comments**

Comment	User	Date
<p>COGCC Inspection Report Summary</p> <p>On Tuesday 5/10/2022 at approximately 1330 hrs. I, Inspector Robbie Revas, Conducted an on-site inspection:</p> <p>Operator: EWS 4 DJ Basin LLC</p> <p>Location: EWS 4 UIC Disposal</p> <p>Facility ID #160002</p> <p>County: Weld.</p> <p>While there, I observed a UIC Disposal Facility,</p> <p>During this inspection no compliance issues were observed:</p> <p>See attached photos.</p> <p>Location: dry, Weather: clear.</p> <p>No follow up on this site inspection needs to be conducted to ensure the Compliance issues have been corrected to comply with COGCC rules.</p> <p>This is a summary of inspection report.</p>	revasr	05/10/2022

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

Document Num	Description	URL
702400428	location pics	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5749901