

**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:

06/29/2022

Submitted Date:

07/01/2022

Document Number:

701103288

**FIELD INSPECTION FORM**

Loc ID 324459 Inspector Name: LONGWORTH, MIKE On-Site Inspection  2A Doc Num: \_\_\_\_\_

**Status Summary:**

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

**Operator Information:**

OGCC Operator Number: 10515  
Name of Operator: GUNNISON ENERGY LLC  
Address: 1801 BROADWAY #1150  
City: DENVER State: CO Zip: 80202

**Findings:**

6 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
Donahue, Jessica		jdonahue@ardorenvironmental.com	Compliance Specialist
Kellerby, Shaun		shaun.kellerby@state.co.us	
,		geops@oxbow.com	Inspection mail box
Johnston, Tyson		Tyson.Johnston@oxbow.com	
Lang, Heather		Heather.Lang@oxbow.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
211688	WELL	PR	10/01/2021	GW	051-06010	FEDERAL 10-90-32	PR

**General Comment:**

COGCC Routine Inspection and Optical Gas Imaging Survey

**Location**

<b>Lease Road:</b>			
Type	Access		
comment:			
Corrective Action			Date:
Type	Main		
comment:			
Corrective Action			Date:

Overall Good:

<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:			
Corrective Action:			Date:
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:			Date:
Type	BATTERY		
Comment:			
Corrective Action:			Date:
Type	CONTAINERS		
Comment:			
Corrective Action:			Date:

<b>Emergency Contact Number:</b>			
Comment:	911		
Corrective Action:			Date: _____

<b>Good Housekeeping:</b>			
Type	TRASH		
Comment:			
Corrective Action:			Date:

Overall Good:

<b>Spills:</b>			
Type	Area	Volume	
In Containment:	No		
Comment:			
<input type="checkbox"/> Multiple Spills and Releases?			

<b>Equipment:</b>			corrective date
Type: Bird Protectors	# 1		
Comment:			
Corrective Action:			Date:

Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:			Date:
Type: Bradenhead	# 1		
Comment:			
Corrective Action:			Date:
Type: Deadman # & Marked	# 4		
Comment:	2 markers are bent over.		
Corrective Action:			Date:

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	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	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:				Date:

**Venting:**

Yes/No	NO	
Comment:		
Corrective Action:		Date:

**Flaring:**

Type	
Comment:	
Corrective Action:	Date:

**Inspected Facilities**

Facility ID: 211688 Type: WELL API Number: 051-06010 Status: PR Insp. Status: PR

**Producing Well**

Comment: [Producing well](#)

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
				Material Handling And Spill Prevention		
Compaction						
		Gravel				
		Culverts				
		Compaction				
Gravel						
		Ditches				
Seeding						

Comment:

Corrective Action:

Date: \_\_\_\_\_

**Pits:**     NO SURFACE INDICATION OF PIT

