



**Location**

Overall Good:

**Signs/Marker:**

|                    |   |       |            |
|--------------------|---|-------|------------|
| Type               | WELLHEAD  |       |            |
| Comment:           | PHOTO 2: WELL SIGN/ WELL NAME POSTED ON SIGN DOES NOT MATCH WELL NAME ON FILE WITH COGCC. |       |            |
| Corrective Action: | Install sign to comply with Rule 605.a.   | Date: | 12/07/2022 |

**Emergency Contact Number:**

Comment:

Corrective Action:

Date:

**Good Housekeeping:**

|                    |   |       |            |
|--------------------|---|-------|------------|
| Type               | UNUSED EQUIPMENT  |       |            |
| Comment:           | PHOTO 3: WELLHEAD AND EQUIPMENT/ UNUSED EQUIPMENT STORED ON LOCATION (BLUE OILER ON STAND). |       |            |
| Corrective Action: | REMOVE UNUSED EQUIPMENT PER RULE 606.   | Date: | 12/07/2022 |

Overall Good:

**Spills:**

| Type | Area | Volume |  |  |
|------|------|--------|--|--|
|      |      |        |  |  |

In Containment: No

Comment:

Multiple Spills and Releases?

**Equipment:**

| Type                      |               |       | corrective date |
|---------------------------|---------------|-------|-----------------|
| Type: Bradenhead          | # 1           |       |                 |
| Comment:                  | IS ACCESSABLE |       |                 |
| Corrective Action:        |               | Date: |                 |
| Type: Ancillary equipment | # 1           |       |                 |
| Comment:                  |               |       |                 |
| Corrective Action:        |               | Date: |                 |
| Type: Progressive Cavity  | # 1           |       |                 |
| Comment:                  |               |       |                 |
| Corrective Action:        |               | Date: |                 |
| Type: Prime Mover         | # 1           |       |                 |
| Comment:                  |               |       |                 |
| Corrective Action:        |               | Date: |                 |
| Type: Deadman # & Marked  | # 4           |       |                 |
| Comment:                  |               |       |                 |
| Corrective Action:        |               | Date: |                 |
| Type: Vertical Separator  | # 1           |       |                 |
| Comment:                  |               |       |                 |

|                     |   |       |  |
|---------------------|---|-------|--|
| Corrective Action:  |   | Date: |  |
| Type: Gas Meter Run | # 1   |       |  |
| Comment:            | CAL. REPORT INDICATES GAS METER HAS BEEN CALIBRATED WITHIN THE LAST YEAR. |       |  |
| Corrective Action:  |   | Date: |  |

**Venting:**

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

**Flaring:**

|                    |  |       |  |
|--------------------|--|-------|--|
| Type               |  |       |  |
| 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 |
| Compaction       | Pass            | Compaction              | Pass                  |               |                          |         |

Comment:

Corrective Action:

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

**Pits:**     NO SURFACE INDICATION OF PIT

Type: Produced Water      Lined: NO      Pit ID: 257679      Lat: 37.100364      Long: -104.741072

Reference Point: \_\_\_\_\_      Other: \_\_\_\_\_      Length: \_\_\_\_\_      Width: \_\_\_\_\_

**Lining:**

Liner Type: \_\_\_\_\_      Liner Condition: \_\_\_\_\_

Comment:

Corrective Action

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

**Fencing:**

Fencing Type: None      Fencing Condition: \_\_\_\_\_

Comment:

Corrective Action

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

**Netting:**

Netting Type: \_\_\_\_\_      Netting Condition: \_\_\_\_\_

Comment:

Corrective Action

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

Anchor Trench Present: NO      Oil Accumulation: NO      2+ feet Freeboard: YES

Comment:

Corrective Action

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

**Attached Documents**

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

| Document Num | Description          | URL   |
|--------------|----------------------|---|
| 403194305    | INSPECTION SUBMITTED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5883569">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5883569</a> |
| 695106846    | INSP. PHOTOS         | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5883553">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5883553</a> |