

**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:

06/12/2023

Submitted Date:

06/13/2023

Document Number:

693806157

**FIELD INSPECTION FORM**Loc ID 316443 Inspector Name: BROWNING, CHUCK On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**

OGCC Operator Number: 96850

Name of Operator: TEP ROCKY MOUNTAIN LLC

Address: 1058 COUNTY ROAD 215

City: PARACHUTE State: CO Zip: 81635

**Status Summary:**

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

**Findings:**

8 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         |
|------------------|--------------|------------------------------------|-----------------|
| Browning, Chuck  | 970-433-4139 | chuck.browning@state.co.us         | Field Inspector |
| ,                |              | COGCCInspectionReports@terraep.com | All Inspections |
| Morgan, John     |              | john.morgan@state.co.us            |                 |
| Labowskie, Steve |              | steve.labowskie@state.co.us        |                 |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name    | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|
| 274578      | WELL | IJ     | 04/01/2021  | DSPW       | 103-10538 | Federal 299-26-2 | SI          |

**General Comment:**

UIC-MIT. Verification of repairs. Wellhead inspection only.

**Location****Lease Road:**

|                   |        |       |  |
|-------------------|--------|-------|--|
| Type              | Access |       |  |
| comment:          |        |       |  |
| Corrective Action | L      | Date: |  |
| Type              | Main   |       |  |
| comment:          |        |       |  |
| Corrective Action | L      | Date: |  |

Overall Good: ☒**Signs/Marker:**

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

Emergency Contact Number:

Comment: 970-285-9377

Corrective Action:

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

Overall Good: ☒**Spills:**

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

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Fencing/:**

|                    |                  |       |  |
|--------------------|------------------|-------|--|
| Type               | WELLHEAD         |       |  |
| Comment:           | Hogwire & T-post |       |  |
| Corrective Action: |                  | Date: |  |

**Equipment:**

|                           |             |       |                 |
|---------------------------|-------------|-------|-----------------|
|                           |             |       | corrective date |
| Type: Ancillary equipment | # 1         |       |                 |
| Comment:                  | Telemetry   |       |                 |
| Corrective Action:        |             | Date: |                 |
| Type: Deadman # & Marked  | # 4         |       |                 |
| Comment:                  |             |       |                 |
| Corrective Action:        |             | Date: |                 |
| Type: Ancillary equipment | # 1         |       |                 |
| Comment:                  | Line heater |       |                 |
| Corrective Action:        |             | Date: |                 |
| Type: Bradenhead          | # 1         |       |                 |
| Comment:                  |             |       |                 |
| Corrective Action:        |             | Date: |                 |

|                        |    |       |  |
|------------------------|----|-------|--|
| <b><u>Venting:</u></b> |    |       |  |
| Yes/No                 | NO |       |  |
| Comment:               |    |       |  |
| Corrective Action:     |    | Date: |  |
| <b><u>Flaring:</u></b> |    |       |  |
| Type                   |    |       |  |
| Comment:               |    |       |  |
| Corrective Action:     |    | Date: |  |

**Inspected Facilities**Facility ID: 274578 Type: WELL API Number: 103-10538 Status: IJ Insp. Status: SI**Underground Injection Control**

UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: \_\_\_\_\_

UIC Routine

|            |   |                              |                             |
|------------|---|------------------------------|-----------------------------|
| Inj./Tube: | Pressure or inches of Hg _____<br>(e.g. 30 psig or -30" Hg) | Previous Test Pressure _____ | MPP _____                   |
| TC:        | Pressure or inches of Hg _____                              | Previous Test Pressure _____ | Inj Zone: <u>WMFK</u>       |
| Brhd:      | Pressure or inches of Hg _____                              | Previous Test Pressure _____ | Last MIT: <u>01/23/2018</u> |
|            |   |                              | AnnMTReq: _____             |

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

Method of Injection: \_\_\_\_\_

Test Type: Verification of Repairs Tbg psi: 0 Csg psi: 1503 BH psi: 0Insp. Status: PassComment: UIC-MIT. Verification of repairs. Wellhead inspection only.  
Form 42 Doc#403419549 received 6/1/2023, with test scheduled for 6/12/2023.  
Pressure well to 1503 psi. Hold for 15 min. Final pressure 1497 psi. -9 psi loss. OK  
Test witnessed by COGCC using gauge on wellhead.

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Berms            | Pass            | Gravel                  | Pass                  |               |                          |         |

Comment: Corrective Action: Date: **Pits:** ☐ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description                 | URL   |
|--------------|-----------------------------|---|
| 693806159    | Inspection photos 6/12/2023 | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6145725">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6145725</a> |