

**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:

06/19/2023

Submitted Date:

06/20/2023

Document Number:

693806202

FIELD INSPECTION FORMLoc ID 316526 Inspector Name: BROWNING, CHUCK On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**

OGCC Operator Number: 51130

Name of Operator: LOCIN OIL CORPORATION

Address: 600 TRAVIS ST STE 6161

City: HOUSTON State: TX Zip: 77002

Status Summary:☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**

5 Number of Comments

1 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
Arnim, Rees	713-469-0275	rarnim@locin.energy	Director of Engineering
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
284102	WELL	SI	04/01/2015	DSPW	103-10724	CS FED NAV 13A-12-4-104 WD	SI

General Comment:

UIC-5 yr MIT. Wellhead inspection only.

Location**Lease Road:**

Type	Access		
comment:			
Corrective Action		Date:	
Type	Main		
comment:			
Corrective Action		Date:	

Overall Good: ☒**Signs/Marker:**

Type	WELLHEAD		
Comment:	Sign not updated to reflect current operator		
Corrective Action:	Install sign to comply with Rule 605.g.	Date:	07/20/2023

Emergency Contact Number:

Comment:		
Corrective Action:		Date: _____

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: _____

☐ Multiple Spills and Releases?**Equipment:**

Type: Bradenhead	# 1		corrective date
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected FacilitiesFacility ID: 284102 Type: WELL API Number: 103-10724 Status: SI Insp. Status: SI**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube:	Pressure or inches of Hg _____ (e.g. 30 psig or -30" Hg)	Previous Test Pressure _____	MPP _____
TC:	Pressure or inches of Hg _____	Previous Test Pressure _____	Inj Zone: <u>CSLGT</u>
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	Last MIT: <u>06/25/2018</u>
			AnnMTReq: _____

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: 5 Year Tbg psi: 0 Csg psi: 510 BH psi: 0Insp. Status: Pass

Comment: UIC-5 yr MIT. Wellhead inspection only.
Form 42 Doc#403433634 received 6/14/2023, with test scheduled for 6/24/2023.
Test date moved to 6/19/2023 at operators request.
Pressure well to 510 psi. Hold for 15 min. Final pressure 510 psi. -0 psi loss. OK
Test witnessed by COGCC using chart on test truck.

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

Document Num	Description	URL
693806205	Inspection photos 6/19/2023	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6154625