

**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:

06/20/2023

Submitted Date:

06/21/2023

Document Number:

712700309**FIELD INSPECTION FORM**Loc ID 325312 Inspector Name: Pattillo, Curtis On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 10133Name of Operator: HILCORP ENERGY COMPANYAddress: P O BOX 61229City: HOUSTON State: TX Zip: 77208**Status Summary:**

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

Findings:13 Number of Comments1 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 |
|------------------|-------|---------------------------------------|--------------------|
| , General | | FarmingtonRegulatoryTechs@hilcorp.com | All SW Inspections |
| Labowskie, Steve | | steve.labowskie@state.co.us | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------|
| 214542 | WELL | PR | 07/29/1997 | GW | 067-06145 | ALLISON UNIT 59 | PR |

General Comment:SW Compliance Specialist Curtis Pattillo conducted a field inspection of the access road and well location.

LocationOverall Good: ☒

| | | | |
|----------------------|----------------------|-------|--|
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

Comment: [Present](#)

Corrective Action:

Date: _____

Overall Good: ☒

| | | | | | |
|----------------|------|--------|--|--|--|
| Spills: | | | | | |
| Type | Area | Volume | | | |

In Containment: No

Comment:

☐ Multiple Spills and Releases?

| | | | |
|--------------------|---|-------|--|
| Fencing/: | | | |
| Type | TANK BATTERY | | |
| Comment: | Pipe and hog wire | | |
| Corrective Action: | | Date: | |
| Type | OTHER | | |
| Comment: | Above ground dog leg valves and misc. valves, pipe fence. | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | Pipe fence | | |
| Corrective Action: | | Date: | |

| | | | |
|-----------------------------------|---|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Ancillary equipment | # 1 | | |
| Comment: | Wellhead | | |
| Corrective Action: | | Date: | |
| Type: Flow Line | # 1 | | |
| Comment: | 2" line from wellhead to separator. | | |
| Corrective Action: | | Date: | |
| Type: Horizontal Heated Separator | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 1 | | |

| | | | | |
|---------------------------|--|--|-------|--|
| Comment: | 2" line from separator to meterhouse. Calibrated within one year. | | | |
| Corrective Action: | | | Date: | |
| Type: Deadman # & Marked | # 1 | | | |
| Comment: | | | | |
| Corrective Action: | | | Date: | |
| Type: Bird Protectors | # 1 | | | |
| Comment: | | | | |
| Corrective Action: | | | Date: | |
| Type: Bradenhead | # 1 | | | |
| Comment: | | | | |
| Corrective Action: | | | Date: | |
| Type: Ancillary equipment | # 1 | | | |
| Comment: | Above ground valves | | | |
| Corrective Action: | | | Date: | |

Tanks and Berms:

| | | | | | | |
|--------------------|---|----------|----------|---------|-----------------------|-------|
| Contents | # | Capacity | Type | Tank ID | SE GPS | |
| PRODUCED WATER | 1 | 200 BBLs | Open Top | | 37.004480,-107.529030 | |
| Comment: | Partially buried, screened open top steel tank. | | | | | |
| 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 FacilitiesFacility ID: 214542 Type: WELL API Number: 067-06145 Status: PR Insp. Status: PR**Producing Well**

Comment:

Corrective Action:

Date:

BradenHeadDate of Last Brhd Test: 04/06/2022 Annual Brhd Completed? NoLast Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: _____End Surf Csg Pressure: 0Comment: Annual bradenhead test past due.07/21/2023Corrective Action: Perform annual bradenhead test and submit Form 17 per Rule 419.c.

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 | Culverts | Pass | | | |
| Gravel | Pass | Gravel | Pass | | | |

Comment: Well location is bare ground.
No visible erosion or sediment migration observed during inspection.

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 |
|--------------|----------------------|---|
| 712700316 | Well Location Photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6155190 |