

**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:

08/25/2023

Submitted Date:

09/30/2023

Document Number:

698601044

FIELD INSPECTION FORM

Loc ID: 423162 Inspector Name: St John, William (Cal) On-Site Inspection: 2A Doc Num: _____

Operator Information:

OGCC Operator Number: 10751
Name of Operator: WME YATES LLC
Address: 200 COLUMBINE ST SUITE 250
City: DENVER State: CO Zip: 80206

Status Summary:

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

Findings:

- 19 Number of Comments
- 2 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 |
|--------------|--------------|-----------------------|---------|
| , Holly | | holly@westlark.com | |
| , Kathleen | 303-513-1360 | kathleen@westlark.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|--------------------|-------------|
| 423156 | WELL | IJ | 01/01/2019 | DSPW | 095-06310 | Roll SWD 843-18-21 | IJ |

General Comment:

[Routine Inspection.](#)

The name change of the Colorado Oil and Gas Conservation Commission to the Energy & Carbon Management Commission required major server updates and created sync issues for remote field personnel's computers. During this time personnel were not able to complete and upload inspections creating a lengthy lag between inspection dates and report submission dates. These circumstances are beyond the Operators control and required dates should be adjusted to match Inspectors FIR submission date. All corrective action dates have been adjusted to accommodate actual FIR submission date. Please contact me directly with any questions or concerns.

Location

| | | | |
|--------------------|---------------------------------------|--|-------|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Two track off maintained county road. | | |
| Corrective Action | L | | Date: |

Overall Good:

| | | | |
|----------------------|---|--|------------------|
| Signs/Marker: | | | |
| Type | BATTERY | | |
| Comment: | Located edge of berm at tank battery. | | |
| Corrective Action: | | | Date: |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | Contents/Quantity/Hazard placards on produced water tanks are weathered and faded. Legible but will need replacement n near future. | | |
| Corrective Action: | | | Date: |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | Contents/Quantity/Hazard label on 55 gallon storage tank at injection building is peeling and not legible. | | |
| Corrective Action: | Install sign to comply with Rule 605.g. | | Date: 11/30/2023 |
| Type | WELLHEAD | | |
| Comment: | Located at well. | | |
| Corrective Action: | | | Date: |

| | | |
|---------------------------|---|-------------|
| Emergency Contact Number: | | |
| Comment: | Emergency contact information posted on the well and battery signs. | |
| Corrective Action: | | Date: _____ |

Overall Good:

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

In Containment: No

Comment:

Multiple Spills and Releases?

| | | | |
|--------------------------|----------------------------|--|-----------------|
| Equipment: | | | corrective date |
| Type: Other | # 1 | | |
| Comment: | Produced water filter pod. | | |
| Corrective Action: | | | Date: |
| Type: Bradenhead | # 1 | | |
| Comment: | At surface. | | |
| Corrective Action: | | | Date: |
| Type: Other | # 1 | | |
| Comment: | Fiberglass well house. | | |
| Corrective Action: | | | Date: |
| Type: Deadman # & Marked | # 4 | | |

| | | | |
|---------------------------|--|-------|--|
| Comment: | | Date: | |
| Corrective Action: | | Date: | |
| Type: Other | # 1 | | |
| Comment: | Electric Transfer Pump | | |
| Corrective Action: | | Date: | |
| Type: Other | # 1 | | |
| Comment: | Steel injection and control building. | | |
| Corrective Action: | | Date: | |
| Type: Other | # 1 | | |
| Comment: | Electric injection pump. | | |
| Corrective Action: | | Date: | |
| Type: Ancillary equipment | # 1 | | |
| Comment: | Wellhead. Tubing in wellbore. Tubing valve open. Casing valve closed. Bradenhead valve closed. | | |
| Corrective Action: | | Date: | |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|---|----------|-------|---------|--------|
| OTHER | 1 | OTHER | OTHER | | , |
| Comment: | 55 Gallon storage tank at injection building. | | | | |
| Corrective Action: | | | | | Date: |

Paint

| | |
|------------------|-------------------|
| Condition | |
| Other (Content) | Label unreadable. |
| Other (Capacity) | Label unreadable. |
| Other (Type) | Plastic |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|--------------------|-------------------------|---------------------|---------------------|-------------|
| Other | Adequate | Walls Sufficient | Base Sufficient | Adequate |
| Comment: | PVC Trough containment. | | | |
| Corrective Action: | | | | Date: |

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|---|----------|-----------|---------|--------|
| PRODUCED WATER | 6 | 400 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 Insufficient | Base Insufficient | Inadequate | |
| Comment: | Vegetation growing inside and on bermed area. Animal borrows in berm walls. | | | | |
| Corrective Action: | Repair or install berms or other secondary containment devices per Rule 912.d.(1). | | | Date: | 10/14/2023 |

Venting:

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

Flaring:

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

Inspected Facilities

Facility ID: 423156 Type: WELL API Number: 095-06310 Status: IJ Insp. Status: IJ

Reclamation - Storm Water - Pit

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | | | | | |

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

| Comment | User | Date |
|---|---------|------------|
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Attached Documents

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

| Document Num | Description | URL |
|--------------|--------------------|---|
| 698601107 | Inspection Photos. | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6269759 |