

**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:

04/17/2024

Submitted Date:

04/17/2024

Document Number:

697009342

**FIELD INSPECTION FORM**Loc ID 307092 Inspector Name: Peterson, Tom On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**

ECMC Operator Number: 52530

Name of Operator: MAGPIE OPERATING INC

Address: 2707 SOUTH COUNTY RD 11

City: LOVELAND State: CO Zip: 80537

**Status Summary:**

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

**Findings:**

4 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 |
|------------------|-------|---------------------------------|---------|
| Fanning, Trisha  |       | tfanning@ardonenvironmental.com |         |
| Warner, Ross     |       | ross.magpieoil@gmail.com        |         |
| Donahue, Jessica |       | jdonahue@ardonenvironmental.com |         |
| Kost, Jody       |       | magpieoil2@yahoo.com            |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 216840      | WELL | SI     | 11/01/2023  | GW         | 069-06027 | MINCH 1-X     | SI          |

**General Comment:**

This is a routine inspection. Any corrective actions from previous inspections that have not been addressed are still applicable. There were no operator personnel on location at the time of this field inspection.

**Location**Overall Good: ☒**Signs/Marker:**

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

Emergency Contact Number:

Comment:

Corrective Action:

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

Overall Good: ☒**Spills:**

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

In Containment: No

Comment:

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

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

**Equipment:**

|                          |     |       |                 |
|--------------------------|-----|-------|-----------------|
| Type: Gas Meter Run      | # 1 |       | corrective date |
| Comment:                 |     |       |                 |
| Corrective Action:       |     | Date: |                 |
| Type: Flow Line          | # 1 |       |                 |
| Comment:                 |     |       |                 |
| Corrective Action:       |     | Date: |                 |
| Type: Deadman # & Marked | # 4 |       |                 |
| Comment:                 |     |       |                 |
| Corrective Action:       |     | Date: |                 |
| Type: Bird Protectors    | # 1 |       |                 |
| Comment:                 |     |       |                 |
| Corrective Action:       |     | Date: |                 |
| Type: Bradenhead         | # 1 |       |                 |

|   |     |       |  |
|---|-----|-------|--|
| Comment: Bradenhead valve is exposed at surface |     |       |  |
| Corrective Action:                              |     | Date: |  |
| Type: Horizontal Heated Separator               | # 1 |       |  |
| Comment:  |     |       |  |
| Corrective Action:                              |     | Date: |  |

**Tanks and Berms:**

| Contents           | # | Capacity | Type      | Tank ID | SE GPS |
|--------------------|---|----------|-----------|---------|--------|
| CRUDE OIL          | 1 | 300 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 Sufficient    | Base Sufficient     | Adequate    |
| Comment:           |          |                     |                     |             |
| Corrective Action: |          |                     |                     | Date:       |

**Venting:**

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

**Flaring:**

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

| Inspected Facilities  |        |       |      |             |           |         |    |               |    |
|---|--------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID:  | 216840 | Type: | WELL | API Number: | 069-06027 | Status: | SI | Insp. Status: | SI |
| Idle Well   |        |       |      |             |           |         |    |               |    |
| Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned |        |       |      |             |           |         |    |               |    |
| Reminder:   |        |       |      |             |           |         |    |               |    |
| Comment: Form 6A #403127270   |        |       |      |             |           |         |    |               |    |
| Corrective Action:  |        |       |      |             |           |         |    |               |    |
| Date:   |        |       |      |             |           |         |    |               |    |
| BradenHead  |        |       |      |             |           |         |    |               |    |
| Date of Last Brhd Test: 07/14/2023  |        |       |      |             |           |         |    |               |    |
| Annual Brhd Completed? Yes  |        |       |      |             |           |         |    |               |    |
| Last Brhd Test Results  |        |       |      |             |           |         |    |               |    |
| Initial Surf Csg Pressure: 46   |        |       |      |             |           |         |    |               |    |
| Fluid Type: WATER H20   |        |       |      |             |           |         |    |               |    |
| End Surf Csg Pressure: 0  |        |       |      |             |           |         |    |               |    |
| Comment:  |        |       |      |             |           |         |    |               |    |
| Corrective Action:  |        |       |      |             |           |         |    |               |    |
| Date:   |        |       |      |             |           |         |    |               |    |
| The subreport 'InspWellFlowline' could not be found at the specified location \\10.14.12            |        |       |      |             |           |         |    |               |    |

Reclamation - Storm Water - Pit

Storm Water:

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

Comment:

Corrective Action:

Date:

Pits: ☐ NO SURFACE INDICATION OF PIT

Attached Documents

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

|              |             |   |
|--------------|-------------|---|
| Document Num | Description | URL   |
| 697009343    | Photos      | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6512235">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6512235</a> |