

**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:

10/31/2024

Submitted Date:

11/05/2024

Document Number:

693807896

FIELD INSPECTION FORM

Loc ID 322396 Inspector Name: BROWNING, CHUCK On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

ECMC Operator Number: 51130
Name of Operator: LOCIN OIL CORPORATION
Address: 600 TRAVIS STREET SUITE 5050
City: HOUSTON State: TX Zip: 77002

Findings:

- 12 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
Lapham, Ken	979-877-4951	klapham@locin.energy	All Inspections
Gross, Jason		jgross@blm.gov	Silt
Labowskie, Steve		steve.labowskie@state.co.us	
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
210408	WELL	PR	12/01/2023	GW	045-06164	LEWIS USA 36-1	PR

General Comment:

ECMC staff performed a routine field inspection on 10/31/2024.
Issues were found requiring corrective action. See inspection text and photos for details.
Any Corrective Actions from previous inspections that have not been addressed are still applicable.

Location			
Lease Road:			
Type	Main		
comment:			
Corrective ActionL			Date:
Type	Access		
comment:			
Corrective ActionL			Date:
Overall Good: <input checked="" type="checkbox"/>			
Signs/Marker:			
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:			Date:
Type	WELLHEAD		
Comment:			
Corrective Action:			Date:
Emergency Contact Number:			
Comment:	<input type="text" value="970-858-7546"/>		
Corrective Action:	<input type="text"/>		Date: _____
Overall Good: <input checked="" type="checkbox"/>			
Spills:			
Type	Area	Volume	
In Containment: No			
Comment:	<input type="text"/>		
<input type="checkbox"/> Multiple Spills and Releases?			
Fencing/:			
Type	TANK BATTERY		
Comment:	Hoqire & T-post around blowdown tank		
Corrective Action:			Date:
Type	WELLHEAD		
Comment:	Pipe fence		
Corrective Action:			Date:
Equipment:			
Type: Deadman # & Marked	# 4		corrective date
Comment:			
Corrective Action:			Date:
Type: Gas Meter Run	# 2		
Comment:	Meter not calibrated annually		
Corrective Action:	Calibrate gas metering equipment annually to comply with rule 430.d.(1).		Date: <u>12/05/2024</u>

Type: Bradenhead	# 1		
Comment:			
Corrective Action:			Date:
Type: Bird Protectors	# 1		
Comment:			
Corrective Action:			Date:
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:			Date:
Type: Compressor	# 1		
Comment:			
Corrective Action:			Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	200 BBLs	STEEL AST		39.416715,-109.042043
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:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	<50 BBLs	PBV STEEL		39.416809,-109.041858
Comment:	Blowdown 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:
Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	<100 BBLS	PBV STEEL		39.416715,-109.042043
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: 210408 Type: WELL API Number: 045-06164 Status: PR Insp. Status: PR

Producing Well

Comment: Flowing

Corrective Action:

Date:

BradenHead

Date of Last Brhd Test: 06/20/2023 Annual Brhd Completed? No

Last Brhd Test Results Initial Surf Csg Pressure: 125 Fluid Type: NONE

End Surf Csg Pressure: 0

Comment: No annual bradenhead test Form 17 on file.

12/05/2024

Corrective Action: Submit Form 17 as directed by Rule 419.c

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
Compaction	Pass	Compaction	Pass	Material Handling And Spill Prevention	Pass	Secondary containment of chemicals

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
693807897	Inspection photos 10/31/2024	https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=6774535