

**FORM
INSP**

Rev
X/15

**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:

05/27/2017

Submitted Date:

05/27/2017

Document Number:

680401519

FIELD INSPECTION FORM

Loc ID 312744 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:

OGCC Operator Number: 10310
Name of Operator: FRAM OPERATING LLC
Address: 2313 LOGOS DR
City: GRAND JUNCTION State: CO Zip: 81505

Findings:

- 6 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Mosnes, Arvid	970-260-7312	arvid.mosnes@framamericas.com	VP Operations
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector
Cook, David	(719) 314-1623	dave@framamericas.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
294259	WELL	TA	03/01/2017	OG	077-09474	MANSUR 33-4-C	TA
437442	WELL	TA	09/19/2014	OG	077-10217	Mansur 33-4-D	TA

General Comment:

MIT to maintain SI/TA status.

Location

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

Overall Good:

Signs/Marker:			
Type	WELLHEAD		
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?

Equipment:			corrective date
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:			Date:
Type: Pump Jack	# 0		
Comment: Equipment removed			
Corrective Action:			Date:

Tanks and Berms:					
Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	3	300 BBLS	STEEL AST		38.965314,-108.233042
Comment:					
Corrective Action:					Date:

Paint

Condition

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	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: 294259 Type: WELL API Number: 077-09474 Status: TA Insp. Status: TA

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment: Last MIT 10/30/2012.
Next MIT due by 10/30/2017.

Corrective Action: Date: _____

Facility ID: 437442 Type: WELL API Number: 077-10217 Status: TA Insp. Status: TA

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment: MIT to maintain SI/TA status.
Pressured casing to 552 psi. Hold for 15 min. Final pressure 448 psi. -4 psi loss. OK
Test witnessed by COGCC using gauges on wellhead.

Corrective Action: Date: _____

Attached Documents

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

Document Num	Description	URL
401294578	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4157375