

**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:

10/19/2018

Submitted Date:

10/19/2018

Document Number:

691401245**FIELD INSPECTION FORM**

Loc ID 321273 Inspector Name: Beardslee, Tom On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10575Name of Operator: 8 NORTH LLCAddress: 370 17TH STREET SUITE 5300City: DENVER State: CO Zip: 80202**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**4 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
,		COGCCInspections@extracti onog.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
206577	WELL	PR	11/01/2017	OW	013-06072	CULVER MC 16-14	PR

General Comment:

LocationOverall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
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	SEPARATOR		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK BATTERY		
Comment:	Sign does not list all wells serviced by battery		
Corrective Action:	Install sign to comply with Rule 210.b.	Date:	12/19/2018

Equipment:			corrective date
Type: Plunger Lift	# 1		
Comment:			
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Emission Control Device	# 1		

Comment:			
Corrective Action:			Date:
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:			Date:
Type: Bird Protectors	# 2		
Comment:			
Corrective Action:			Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities									
Facility ID:	206577	Type:	WELL	API Number:	013-06072	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:		PR							
Corrective Action:								Date:	
BradenHead									
Comment:		Plumbed to surface							
Corrective Action:								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

Comment:

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
691401246	Location photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4616237