Inspector Name: Waldron, Emily

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: 06/04/2020
Submitted Date: 07/02/2020

Document Number: 689804294

FIELD INSPECTION FORM

Loc ID Inspector Name: On-Site In			nspection	Sta	Status Summary:				
312901	Waldron, Em			N Doc Num:		THIS IS A FOLLOW UP INSPECTION			
Operator In	formation:				X	FO	DLLOW UP INSPECTION REQU	JIRED	
-	rator Number:	10677				NC	O FOLLOW UP INSPECTION R	REQUIRED	
					Fir	ndin	igs:		
IName or Op	erator: WOLVER	INE RESU	UKCES LLC			6 Number of Comments			
Address: 1	09 EAST 17TH S	TREET #43	30			3 Number of Corrective Actions			
City:	CHEYENNE	State:	WY	Zip: 820	01	Corrective Action Response Requested			
							· · · · · · · · · · · · · · · · · · ·		
						ANY CORRECTIVE ACTION(S) FROM PREVIOUS INSPECTIONS THAT HAVE NOT BEEN ADDRESSED ARE STILL APPLICABLE			
Contact Info	ormation:				L				
Contact Na	ıme	Phor	ne	Email		(Comment		
				dnr_cogccengi	ineering@stat	@state.			
Reeves, Shane			shane@wolve	rineresources.	.c				
Kellerby, S	haun			shaun.kellerby	@state.co.us				
Inspected F	acilities:							,	
Facility ID	Туре	Status	Status Date	Well Class API Num			Facility Name	Insp Status	
222795	WELL	SI	02/01/2019	GW	081-06155		BIGHOLE-FED LAND 15-2	SI	
On Thursd Bighole-Fe While there During this Incomplete Annual we Review of June 2019 A follow up	d Land 15-2 at 05 e, I observed a sh inspection the foll or missing tank leeds on location. S monthly operation. Well shut in at tir	approximate 5-081-0615 aut-in location	tely 12:00, I, Installed to the compliant of the compliant of the compliant of the complex with I indicate operators of the conducted to	onty Colorado. ce issues were obtoesing to comply we still the comply with the complete the com	oserved: vith Rule 210.d b 6/2020. submitting more) to COGCC pe	by 8/ nthly er rul	field inspection at Wolverine Res/17/2020. r operations reports. Last productle 309 by 7/31/2020. been corrected to comply with 0	ction reported	

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<u>Location</u>						
Overall Good:						
Signs/Marker:						
Туре	BATTERY					
Comment:						
Corrective Action:					Date:	
Туре	WELLHEAD					
Comment:						
Corrective Action:					Date:	
Туре	TANK LABELS/PLACARD	os				
Comment:	No capacity on produced v	water tank lat	oel.			
Corrective Action:	Install sign to comply with	Rule 210.d.			Date:	08/17/2020
Emergency Contact N	Number:					
Comment:	303-241-5523					
Corrective Action:					Date:	
Good Housekeeping	<u>=====================================</u>					
Туре	WEEDS					
Comment:	Annual weeds on location.					
Corrective Action:	Comply with Rule 603.f .				Date:	07/16/2020
Overall Good:						
Spills:						
Туре	Area	Volume				
In Containment: N						
Comment:						
Multilple Spills a	and Releases?					
Fencing/:						
Туре	TANK BATTERY					
Comment:						
Corrective Action:					Date:	
Equipment:					corrective date	
Type: Deadman # & N	Marked # 4	1				
Comment:						
Corrective Action:					Date:	
Type: Bird Protectors	#					
Comment:	nt:					
Corrective Action:	Corrective Action: Date:					
Type: Horizontal Hea	ted Separator # 1	1				
	Comment:					
Corrective Action:					Date:	

Inspector Name: Waldron, Emily # 1 Type: Gas Meter Run Comment: Corrective Action: Date: Tanks and Berms: Contents Capacity Type Tank ID SE GPS CRUDE OIL 200 BBLS STEEL AST Comment: Corrective Action: Date: **Paint** Condition Adequate Other (Content) Other (Capacity) Other (Type) **Berms** Туре Capacity Permeability (Wall) Permeability (Base) Maintenance Earth Adequate Adequate Comment: Corrective Action: Date: Contents Capacity Tank ID SE GPS Type PRODUCED WATER 1 HEATED STEEL AST Comment: Corrective Action: Date: **Paint** Condition Adequate Other (Content) Other (Capacity) Other (Type) **Berms** Permeability (Wall) Type Capacity Permeability (Base) Maintenance Earth Adequate Adequate Comment: Corrective Action: Date: Venting: Yes/No NO Comment: Corrective Action: Date: Flaring: Туре Comment:

nspector Name: Waldron, Emily Corrective Action:	Date:	

Inspected Facilities									
acility ID: _	222795	Type:	WELL	API Number:	081-06155	Status: _	SI	Insp. Statu	us: SI
				<u>ldle \</u>	<u>Nell</u>				
Purpos	e: 🔀 Sh	ut In	Temporarily		Reminder:				
<u>Co</u>	omment:	Review of m	nonthly operation	ns records indicate Last production rep	operator is deling	uent in submi	tting		
		montnly ope	erations reports.	Last production rep	oorted in June 201	<u></u>			
Corrective	e Action:	Submit requ	ired Form 7(s) t	o COGCC per rule	309.			Date: 07/3	31/2020

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Reclamation - Storm Water - Pit								
	Necialilation - Storin Water - Fit							
Storm Water:								
Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment		
Comment:	No stormwater BMPs observed. No apparent soil migration; erosion or soil movement.							
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:

1	• , ,	•
Document Num	Description	URL
402436652	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5189494
689804384	Inspection Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5189484

Date Run: 7/9/2020 Doc [#689804294]