

**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:

07/01/2021

Submitted Date:

07/06/2021

Document Number:

688310756

FIELD INSPECTION FORM

Loc ID 317071 Inspector Name: Sherman, Susan 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: 10690
Name of Operator: IMPETRO RESOURCES LLC
Address: 2820 LOGAN DRIVE
City: LOVELAND State: CO Zip: 80538

Findings:

10 Number of Comments
1 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
Bradley, Sam	970-593-8626	sbradley.impetro@gmail.com	Principal Agent
Gibson, Rick	970-768-6880	rtgibson01@msn.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
235731	WELL	PR	04/07/1969	OW	121-08221	ROBBINS A1	PR

General Comment:

High Priority Inspection
None of my photos of the tank battery came out.
Stained soil at wellhead and engine muffler.

Location

Overall Good:

Signs/Marker:

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

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Good Housekeeping:

Type	OTHER		
Comment:	Stained soil at wellhead and engine muffler (see attached photos).		
Corrective Action:	"For localized stained soils or oily waste - ""Properly dispose of oily waste in accordance with 905.e.""	Date:	07/28/2021

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:

Type	PUMP JACK		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Equipment:

Type: Bird Protectors	# 1		corrective date
Comment:			

Corrective Action:		Date:	
Type: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:	Form 17 is required to be completed and submitted annually.		
Corrective Action:		Date:	
Type: Vertical Heater Treater	# 1		
Comment:	propane, shed, bermed		
Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment:	propane		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1		Open Top		,
Comment:	check that pipe ends have bird protectors				
Corrective Action:					Date:

Paint

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate			
Comment:				
Corrective Action:				Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	3	300 BBLs	STEEL AST		,
Comment:					
Corrective Action:					Date:

Paint

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate			

Comment:		
Corrective Action:		Date:

Wells Served By Facilities Above

AirsID

API Number
121-08221

API Number	AirsID
------------	--------

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Location Construction

Location ID: 235731 CDP: _____

Comment:

Corrective Action:

Date: _____

Form 2A COAs:

Comment:

Corrective Action:

Date: _____

Wildlife BMPs:

Comment:

Corrective Action:

Date: _____

Comment:

Corrective Action:

Date: _____

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____

Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____

Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Inspected Facilities

Facility ID: 235731 Type: WELL API Number: 121-08221 Status: PR Insp. Status: PR

Producing Well

Comment: [PR 4/1/2021 production reported to COGCC database.](#)

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

Type: Produced Water Lined: NO Pit ID: Lat: Long:

Reference Point: _____ Other: _____ Length: _____ Width: _____

Lining:

Liner Type: Liner Condition:

Comment:

Corrective Action

Date:

Fencing:

Fencing Type: Livestock Fencing Condition:

Comment: on pasture sides of pit

Corrective Action

Date:

Netting:

Netting Type: Netting Condition:

Comment:

Corrective Action

Date:

Anchor Trench Present: Oil Accumulation: NO 2+ feet Freeboard: YES

Comment:

Corrective Action

Date:

Attached Documents

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

Document Num	Description	URL
402740654	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5473003
688310791	IMPETRO, Robbins A1	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5472988