Inspector Name: Waldron, Emily

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: 07/20/2021 Submitted Date:

Document Number:

07/29/2021

EIEI D INSDECTION EODM

| | | FIELL | INSPECT | ION FORIM | | | | <u>68</u> | <u> 9806095</u> |
|--|---------------|--------|----------------------------------|--------------------|---------------|---|--|-----------|-----------------|
| Loc ID Inspector Name: 313024 Waldron, Emily | | | On-Site Inspection 2A Doc Num: | | | Status Summary: THIS IS A FOLLOW UP INSPECTION | | | |
| Operator Information: | | | | | | FOLLOW UP INSPECTION REQUIRED | | | |
| | rator Number: | 3975 | | | | | IO FOLLOW UP INSPEC | CTION RE | EQUIRED |
| • | | | TION COMPAN | Υ | | <u>Find</u> i | ings: | | |
| 6 1 | | | | | | | Number of Comment | S | |
| Address: P | O BOX 416 | | | | | 4 | 4 Number of Corrective Actions | | |
| City: | RANGELY | State: | CO | Zip: 816 | 648 | X C | — orrective Action Response I | Requested | |
| | | | | | ' | P | NY CORRECTIVE ACT PREVIOUS INSPECTION SEEN ADDRESSED ARI | IS THAT | HAVE NOT |
| Contact Inf | ormation: | | | | | | | | |
| Contact Na | ame | Phor | Phone Email | | | Comment | | | |
| General, Contact | | | argaliexplorationcompar mail.com | | | @g | | | |
| Inspected F | acilities: | | | | | | | | |
| Facility ID | Туре | Status | Status Date | Well Class API Nur | | | Facility Name | | Insp Status |
| 223380 | WELL | SI | 01/01/2020 | DSPW | 081-0674 | | Federal 1-35 06744 | | SI |
| observed: no bradenl | | rent | sfer from Musta | ang to Argali app | roved 10/6/20 | 020 dd | ocument number 402424 | 253. Com | npliance issues |
| | | | | | | | | | |

Inspector Name: Waldron, Emily **Location** Overall Good: Signs/Marker: Type WELLHEAD Comment: Wellhead sign inaccurate. Corrective Action: Install sign to comply with Rule 605.d. Date: 08/30/2021 **Emergency Contact Number:** Comment: No emergency contact for current operator on location. Date: 08/30/2021 Corrective Action: Install sign to comply with Rule 605. Overall Good: Spills: Type Area Volume In Containment: No Comment: Multilple Spills and Releases? **Equipment:** corrective date Type: Bradenhead Comment: Bradenhead inaccessible or not visible. Corrective Action: Install appropriate fittings to allow bradenhead visual inspection as per Rule 419.a.(1), Date: 08/09/2021 Venting: Yes/No NO Comment: Corrective Action: Date: Flaring: Туре Comment: Corrective Action: Date:

| Inspector Name: waldron, Emily | | | | | | | | | | |
|--------------------------------|----------|------------------|----------------|-------------------------------------|------------------------|----------------|-----|-----------|------------|----|
| | | | | Inspecte | d Facilities | | | | | |
| Facility ID: | 223380 | Type: | WELL | API Number: | 081-06744 | Status: | SI | Insp | . Status: | SI |
| | | | | Underground In | jection Control | | | | | |
| UIC Violatio | n: | | | | Maximum Injection | on Pressure: _ | | | | |
| UIC Routine | | | | | | | | | | |
| Inj./Tube: | Pre | ssure or inches | s of Hg 200 | Pr | Previous Test Pressure | | | | | |
| | (e. | g. 30 psig or -3 | 80" Hg) | | | | | Inj Zone: | LWIS | |
| TC: | Pre | ssure or inches | s of Hg | Pr | evious Test Press | ure | | Last MIT: | 08/25/2016 | |
| Brhd: | Pre | ssure or inches | s of Hg | Pr | evious Test Press | ure | Anr | nMTReq: | | |
| <u>Con</u> | nment: | | | shut in at time of ue by 8/25/2021. | nspection. | | | | | |
| Corrective . | Action: | Perform MIT p | er Rule 417.a. | (1) | | | | Date: | 08/26/2021 | |
| Method of In | jection: | GRAVITY FEI | ED | | | | | | | |
| Test Type: | | | | Tbg psi: | Csg psi: | | В | H psi: | | |
| Insp. Statu | ıs: | | | | | | | | | |
| Con | nment: | | | | | | | | | |
| Corrective | Action: | | | | | | | Date: | | |
| | | | | | | | | | | |

Inspector Name: Waldron, Emily

| Reclamation - Storm Water - Pit | | | | | | | |
|------------------------------------|--|----------------------------|--------------------------|---------------|-----------------------------|---------|--|
| | | | | | | | |
| Storm Water: | 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:

| _ | - : : | |
|--------------|-------------------------|--|
| Document Num | Description | URL |
| 402763877 | INSPECTION SUBMITTED | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5492277 |
| 689806096 | Inspection Photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5492272 |

Date Run: 8/5/2021 Doc [#689806095]