

**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:

07/12/2023

Submitted Date:

07/12/2023

Document Number:

699106908

**FIELD INSPECTION FORM**Loc ID 331294 Inspector Name: Burns, Adam On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**

OGCC Operator Number: 76840

Name of Operator: SCHNEIDER ENERGY SERVICES INC

Address: P O BOX 889

City: FORT MORGAN State: CO Zip: 80701

**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☒ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED

**Findings:**

9 Number of Comments

3 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 |
|-----------------|---------------------------------|--------------------------|---------|
| Schneider, Jeff | 970-867-9437/<br>(214) 244-3819 | jeff@schneiderenergy.com |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 260263      | WELL | SI     | 10/01/2021  | OW         | 123-20447 | YOCAM 22-32   | SI          |

**General Comment:**

Form 6(N) #403049814. Expires 10/12/2023

Form 6A #403236200

**Location**Overall Good: ☐

|                      |                      |       |  |
|----------------------|----------------------|-------|--|
| <b>Signs/Marker:</b> |                      |       |  |
| Type                 | TANK LABELS/PLACARDS |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |
| Type                 | BATTERY              |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |
| Type                 | WELLHEAD             |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |

Emergency Contact Number:

Comment: Adequate

Corrective Action:

Date: \_\_\_\_\_

**Good Housekeeping:**

|                    |  |       |            |
|--------------------|--|-------|------------|
| Type               | OTHER  |       |            |
| Comment:           | Stained oil under separator. See attached photo              |       |            |
| Corrective Action: | "Properly dispose of oily waste in accordance with 905.e."   | Date: | 08/31/2023 |
| Type               | OTHER  |       |            |
| Comment:           | Stained oil around the production tanks. See attached photos |       |            |
| Corrective Action: | "Properly dispose of oily waste in accordance with 905.e."   | Date: | 08/31/2023 |

Overall Good: ☐

|                |      |        |  |  |
|----------------|------|--------|--|--|
| <b>Spills:</b> |      |        |  |  |
| Type           | Area | Volume |  |  |

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Fencing/:**

|                    |          |       |  |
|--------------------|----------|-------|--|
| Type               | LOCATION |       |  |
| Comment:           | Barbwire |       |  |
| Corrective Action: |          | Date: |  |

**Equipment:**

|                    |     |       |                 |
|--------------------|-----|-------|-----------------|
|                    |     |       | corrective date |
| Type: Bradenhead   | # 1 |       |                 |
| Comment:           |     |       |                 |
| Corrective Action: |     | Date: |                 |
| Type: Prime Mover  | # 1 |       |                 |
| Comment:           |     |       |                 |
| Corrective Action: |     | Date: |                 |

|                                   |     |  |       |
|-----------------------------------|-----|--|-------|
| Type: Pump Jack                   | # 1 |  |       |
| Comment:                          |     |  |       |
| Corrective Action:                |     |  | Date: |
| Type: Deadman # & Marked          | # 4 |  |       |
| Comment:                          |     |  |       |
| Corrective Action:                |     |  | Date: |
| Type: Horizontal Heated Separator | # 1 |  |       |
| Comment:                          |     |  |       |
| Corrective Action:                |     |  | Date: |
| Type: Bird Protectors             | # 2 |  |       |
| Comment:                          |     |  |       |
| Corrective Action:                |     |  | Date: |

**Tanks and Berms:**

|                    |  |          |          |         |        |  |
|--------------------|--|----------|----------|---------|--------|--|
| Contents           | #  | Capacity | Type     | Tank ID | SE GPS |  |
| PRODUCED WATER     | 1  | 100 BBLS | Open Top |         | ,      |  |
| Comment:           | opent top fiberglass tank. Does have netting on top. |          |          |         |        |  |
| Corrective Action: |  |          |          |         | Date:  |  |

**Paint**

|                  |  |  |  |  |  |
|------------------|--|--|--|--|--|
| Condition        |  |  |  |  |  |
| Other (Content)  |  |  |  |  |  |
| Other (Capacity) |  |  |  |  |  |
| Other (Type)     |  |  |  |  |  |

**Berms**

|                    |          |                     |                     |             |                       |  |
|--------------------|----------|---------------------|---------------------|-------------|-----------------------|--|
| Type               | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |                       |  |
|                    |          |                     |                     |             |                       |  |
| Comment:           |          |                     |                     |             |                       |  |
| Corrective Action: |          |                     |                     |             | Date:                 |  |
| Contents           | #        | Capacity            | Type                | Tank ID     | SE GPS                |  |
| CRUDE OIL          | 2        | 300 BBLS            | STEEL AST           |             | 40.182500,-104.238600 |  |
| Comment:           |          |                     |                     |             |                       |  |
| Corrective Action: |          |                     |                     |             | Date:                 |  |

**Paint**

|                  |          |  |  |  |  |
|------------------|----------|--|--|--|--|
| Condition        | Adequate |  |  |  |  |
| Other (Content)  |          |  |  |  |  |
| Other (Capacity) |          |  |  |  |  |
| Other (Type)     |          |  |  |  |  |

**Berms**

|          |  |                     |                     |             |  |
|----------|--|---------------------|---------------------|-------------|--|
| Type     | Capacity   | Permeability (Wall) | Permeability (Base) | Maintenance |  |
| Earth    | Inadequate   | Walls Insufficient  | Base Sufficient     | Inadequate  |  |
| Comment: | Berms are weathered and need to be repaired. See attached photos |                     |                     |             |  |

|                    |  |       |            |
|--------------------|--|-------|------------|
| Corrective Action: | Repair or install berms or other secondary containment devices per Rule 603.o. | Date: | 08/31/2023 |
|--------------------|--|-------|------------|

**Venting:**

|                    |    |       |  |
|--------------------|----|-------|--|
| Yes/No             | NO |       |  |
| Comment:           |    |       |  |
| Corrective Action: |    | Date: |  |

**Flaring:**

|                    |  |       |
|--------------------|--|-------|
| Type               |  |       |
| Comment:           |  |       |
| Corrective Action: |  | Date: |

**Inspected Facilities**Facility ID: 260263 Type: WELL API Number: 123-20447 Status: SI Insp. Status: SI**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: \_\_\_\_\_Comment: SI

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

**BradenHead**Date of Last Brhd Test: 08/08/2022 Annual Brhd Completed? YesLast Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: \_\_\_\_\_End Surf Csg Pressure: 0

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

**COGCC Comments**

| Comment   | User   | Date       |
|---|--------|------------|
| <p>ECMC Inspection Report Summary</p> <p>On Wednesday 7/12/23 at approximately 0618hrs I, Inspector Adam Burns, Conducted an on-site inspection at YOCAM 22-32 of SCHNEIDER ENERGY SERVICES INC .</p> <p>API #05-123-20447 in Weld County, Colorado.</p> <p>During this inspection the following possible compliance issues were observed:</p> <p>Stained oil around the production tanks. "Properly dispose of oily waste in accordance with 905.e." With a Corrective Action date of 8/31/23</p> <p>Stained oil under separator. "Properly dispose of oily waste in accordance with 905.e." With a Corrective Action date of 8/31/23</p> <p>Berms are weathered and need to be repaired. Repair or install berms or other secondary containment devices per Rule 603.o. With a Corrective Action date of 8/31/23</p> <p>A follow up on this site inspection needs to be conducted to ensure the compliance issues have been corrected to comply with ECMC rules.</p> <p>This is a summary of the inspection report.</p> | burnsa | 07/12/2023 |

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

| Document Num | Description       | URL   |
|--------------|-------------------|---|
| 699106909    | Inspection Photos | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6178418">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6178418</a> |