

# Leak Detection and Repair (LDAR) Annual Report Form<sup>1</sup>



Please submit via email to: [cdphe\\_reg7LDAR\\_annualreports@state.co.us](mailto:cdphe_reg7LDAR_annualreports@state.co.us)

## Section 1: General Information

Company Name:	Western Operating Company		
Inspection Year:	2015	# Facilities Inspected: <sup>2</sup>	44
Contact Person:	Steven D. James	Title:	President
Phone Number:	303-893-2438	E-mail Address:	<a href="mailto:steve@westernoperating.com">steve@westernoperating.com</a>

## Section 2: LDAR Inspections

Inspection Method	# Inspections <sup>3</sup>
AIMM at Natural Gas Compressor Stations:	N/A
AIMM at Well Production Facilities:	45
AVO at Well Production Facilities:	878
<b>TOTAL</b>	<b>923</b>

## Section 3: Leaking Components Details

Component Type	# Leaks Identified <sup>4</sup>	# Leaks Repaired	# Leaks on Delay of Repair List as of Dec 31
Valves:	10	3	7
Connectors:	5	3	2
Flanges:	1	0	1
Pump Seals:	0	0	0
Pressure Relief Devices:	5	3	2
<b>TOTAL</b>	<b>21</b>	<b>9</b>	<b>12</b>

## Section 4: Responsible Official Certification

All information contained in the LDAR Annual Report must be certified by a responsible official as defined in Colorado Regulation No. 3, Part A, Section 1.B.38.

Please note the Colorado Statutes state that any person who knowingly, as defined in §18-1-501(6), C.R.S., makes any false material statement, representation, or certification in this document is guilty of a misdemeanor and may be punished in accordance with the provisions of §25-7 122.1, C.R.S.

I, the Responsible Official, have reviewed this annual report in its entirety and, based on information and belief formed after reasonable inquiry, I certify that the statements and information contained in this report are true, accurate and complete.

Printed/Typed Name - Responsible Official:	Title:
Steven D. James	President
Signature:	Date:
	12-10-16

**Section 5: Additional Notes**

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**Section 6: Facilities Inspected****Addendum Table 1**

<b>Plant AIRS ID (e.g., 123/7896)</b>	<b>Location (e.g., Lat/Long)</b>	<b>Facility Name</b>
061/0217		BERTHA PYLES 2, 3
061/0218		BUTLER USA 1-X
061/0219		DAWSON 1
061/0220		DAWSON A 1, A 2 Central Tank Battery
061/0221		HARRISON 4, 7
061/0038		KING-PYLES 4
NA	38.40981/-102.44794	FOSTER 1
NA	38.42067/-102.44789	PYLES 4
075/0114		JOHN NELSON 2
075/0116		NELSON JARRETT #1 SWD
075/0104		NELSON A-6
075/0106		PROPST B3X
075/0107		PROPST C-1X
075/0115		REINERS B-4
075/0109		ROBERTS 1
075/0110		ROPER E-1 X
075/0111		TURNER 1
075/0113		VAN GUNDY, FRED 2
075/0123		ARTHUR EDENS 1
NA	40.71548/-103.39085	EMERALD 6-34
075/0105		PROPST 2
075/0108		REIKE C-3
075/0112		TURNER, FRANK 1
087/0112		SAND RIVER UNIT #1, PF #1, #6, #11 Central Tank Battery
087/0081		MESSENGER 2, 3
TBD	40.22893/-103.94533	SAUER 1
087/0109		AMBROSE-CUNNINGHAM 42-25
NA	40.09924/-103.82671	GLENN STATE 4-36
NA	40.31778/-104.01048	GREELEY FARMS 1
087/0110		IMPALA RESOURCES AMBROSE 2-25
NA	40.26744/-103.9685	SHORTY 1
121/0264		BOBCAT D SAND UNIT 18, 20, 23 Central Tank Battery
121/0265		FORBES 1-14
121/0283		G O YEAMANS 1
121/0284		J KENNEDY 1
121/0289		KALCEVIC FARMS 23-17, 24-17 Central Tank Battery
121/0287		KNUTZEN 1, 2, 3 Central Tank Battery

Addendum Table 1		
Plant AIRS ID (e.g., 123/7896)	Location (e.g., Lat/Long)	Facility Name
121/0288		PECK A-1
121/0267		XENIA WEST UNIT 3-2, 3-3, 3-3X, 4-4 Central Tank Battery
121/0266		FORBES 1-23
NA	40.08247/-103.21354	STARLIN 42-5
NA	40.10241/-103.20422	WEBER 11-33
123/0197		SPEAKER P
123/9D8E		HOOZEE-BJOLIN 1

## Footnotes:

<sup>1</sup> The fields shaded in blue are mandatory required elements of the annual report. The remaining information is voluntary and requested to help the Division better interpret the implementation of the leak detection and repair program.

<sup>2</sup> "# of Facilities Inspected" should reflect the total number of unique physical locations (e.g. well production facilities and natural gas compressor stations) inspected during the calendar year reported.

<sup>3</sup> The "Total # of Inspections" should reflect the number of unique facility inspections events (e.g. unique complete facility AVO and AIMM events) that occurred across all facilities (as reflected in Section 1) monitored by the company during the calendar year reporting period. This number should not reflect a count representing the number of individual component(s) monitored. In addition, re-monitoring events to verify an earlier identified leak has been repaired as required by Regulation 7, Section XVII.F.7 should not be counted in the "Total # of Inspections" reported.

<sup>4</sup> The "# of Leaks Identified" should reflect the sum total of component leaks identified during all facility inspections (e.g. AVO and AIMM) that occurred during the calendar year reported.