

May 24, 2016

LDAR Coordinator Colorado Department of Public Health and Environment Air Pollution Control Division APCD-SS-B1 4300 Cherry Creek Drive South Denver, Colorado 80246-1530

RE: Bronco Pipeline Company 2015 Leak Detection and Repair (LDAR) Annual Report Form

Dear Mr. Sir/Madam,

Bronco Pipeline Company is pleased to submit the attached CDPHE LDAR Annual Report Form for Niobrara 2015 Operations. During 2015, we had one applicable facility, the Pony Station.

If you have any questions, please do not hesitate to call me at (303) 268-3704 or Beth Aldrich, Niobrara Environmental Coordinator, at (303) 268-3708 if you have any questions or need additional information.

Sincerely,

Kenneth Powers Niobrara Operations Manager

cc: Beth Aldrich, COP Attachments: As stated Regulation 7, Section XVII.F.9

Leak Detection and Repair (LDAR) Annual Report Form¹

Please submit via email to: cdphe_reg7LDAR_annualreports@state.co.us



Company Name:	ConocoPhillips				
Inspection Year:	2015	# Facilities Inspect	# Facilities Inspected: ² 1		
Contact Person:	Beth Aldrich	Title:	Enviro. Coordinator		
Phone Number:	303-268-3708	E-mail Address:	Beth.A.Ald	lrich@cop.com	

Section 2: LDAR Inspections

Section 1: General Information

Inspection Method	# Inspections ³
AIMM at Natural Gas Compressor Stations:	1
AIMM at Well Production Facilities:	0
AVO at Well Production Facilties:	0
TOTAL	1

Section 3: Leaking Components Details

Component Type	# Leaks Identified ⁴	# Leaks Repaired	# Leaks on Delay of Repair List as of Dec 31
Valves:	0	0	0
Connectors:	0	0	0
Flanges:	0	0	0
Pump Seals:	0	0	0
Pressure Relief Devices:	0	0	0
TOTAL	0	0	0

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:
Kenneth Powers	Operations Manager
Signature:	Date:
HAR.	5.23.16

Section 6: Facilties Inspected

Addendum Table 1						
Plant AIRS ID	Location		Facility Name			
(e.g., 123/7896)	(e.g., La					
001/2077	14.05909	-80.175	Pony Station			
				· · · · · · · · · · · · · · · · · · ·		
			<u> </u>			
			<u> </u>			
		_				
				_		

Footnotes:

¹ 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.

² "# 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.

³ 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 nujmber 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.

⁴ 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.