

Inspector Name: BROWNING, CHUCK

**FORM  
INSP**Rev  
05/11**State of Colorado****Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



|    |    |    |    |
|----|----|----|----|
| DE | ET | OE | ES |
|----|----|----|----|

Inspection Date:

09/30/2011

Document Number:

659300008

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

|                     |               |               |               |                        |
|---------------------|---------------|---------------|---------------|------------------------|
| Location Identifier | Facility ID   | Loc ID        | Tracking Type | Inspector Name:        |
|                     | <u>221992</u> | <u>312598</u> |               | <u>BROWNING, CHUCK</u> |

**Operator Information:**

OGCC Operator Number: 53255 Name of Operator: MARALEX RESOURCES, INC

Address: P O BOX 338

City: IGNACIO State: CO Zip: 81137

**Contact Information:**

| Contact Name   | Phone                             | Email                  | Comment            |
|----------------|-----------------------------------|------------------------|--------------------|
| O'Hare, Mickey | (970) 563-4000/<br>(719) 429-3529 | amohare@maralexinc.com | President          |
| Graves, Jim    | (970) 858-8550                    | mrinc20@qwest.net      | Operations Manager |

**Compliance Summary:**

|              |           |            |             |                              |            |                |                 |
|--------------|-----------|------------|-------------|------------------------------|------------|----------------|-----------------|
| QtrQtr: NENE |           | Sec: 14    | Twp: 8S     |                              | Range: 98W |                |                 |
| Insp. Date   | Doc Num   | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I   | Pas/Fail (P/F) | Violation (Y/N) |
| 08/08/2006   | 200101421 | PR         | PR          | S                            |            | P              | N               |

**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name          |                                     |
|-------------|------|--------|-------------|------------|-----------|------------------------|-------------------------------------|
| 221992      | WELL | PR     | 07/27/1998  |            | 077-08594 | SOUTH SHALE RIDGE 1-14 | <input checked="" type="checkbox"/> |

**Equipment:**Location Inventory

|                             |                        |                     |                         |
|-----------------------------|------------------------|---------------------|-------------------------|
| Special Purpose Pits: _____ | Drilling Pits: _____   | Wells: _____        | Production Pits: _____  |
| Condensate Tanks: _____     | Water Tanks: _____     | Separators: _____   | Electric Motors: _____  |
| Gas or Diesel Motors: _____ | Cavity Pumps: _____    | LACT Unit: _____    | Pump Jacks: _____       |
| Electric Generators: _____  | Gas Pipeline: _____    | Oil Pipeline: _____ | Water Pipeline: _____   |
| Gas Compressors: _____      | VOC Combustor: _____   | Oil Tanks: _____    | Dehydrator Units: _____ |
| Multi-Well Pits: _____      | Pigging Station: _____ | Flare: _____        | Fuel Tanks: _____       |

**Location****Signs/Marker:**

| Type    | Satisfactory/Unsatisfactory | Comment          | Corrective Action | CA Date           |
|---------|-----------------------------|------------------|-------------------|-------------------|
| BATTERY | Unsatisfactory              | no signs on tank | see rule 210.     | <u>01/31/2012</u> |

Emergency Contact Number: (S/U/V) Satisfactory

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

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

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

|                           |                             |                             |                        |            |
|---------------------------|-----------------------------|-----------------------------|------------------------|------------|
| <b>Good Housekeeping:</b> |                             |                             |                        |            |
| Type                      | Satisfactory/Unsatisfactory | Comment                     | Corrective Action      | CA Date    |
| WEEDS                     | Unsatisfactory              | weeds growing thru pumpjack | clear weeds around pad | 01/31/2012 |

|  |      |        |                   |         |
|--|------|--------|-------------------|---------|
| <b>Spills:</b>   |      |        |                   |         |
| Type   | Area | Volume | Corrective action | CA Date |
| <input type="checkbox"/> Multiple Spills and Releases? |      |        |                   |         |

|                   |   |                             |             |            |
|-------------------|---|-----------------------------|-------------|------------|
| <b>Equipment:</b> |   |                             |             |            |
| Type              | # | Satisfactory/Unsatisfactory | Comment     | CA Date    |
| Pump Jack         | 1 | Unsatisfactory              | clear weeds | 01/31/2012 |

|  |                |          |           |                             |
|--|----------------|----------|-----------|-----------------------------|
| <b>Tanks/Berms:</b> <input type="checkbox"/> New Tank Tank ID: _____ |                |          |           |                             |
| Contents   | #              | Capacity | Type      | SE GPS                      |
| CRUDE OIL  | 1              | 300 BBLS | STEEL AST | ,                           |
| S/U/V:   | Unsatisfactory | Comment: |           |                             |
| Corrective Action:   | close hatch    |          |           | Corrective Date: 01/31/2012 |

|                  |          |  |  |  |
|------------------|----------|--|--|--|
| <b>Paint</b>     |          |  |  |  |
| Condition        | Adequate |  |  |  |
| Other (Content)  |          |  |  |  |
| Other (Capacity) |          |  |  |  |
| Other (Type)     |          |  |  |  |

|                   |   |                     |                     |                             |
|-------------------|---|---------------------|---------------------|-----------------------------|
| <b>Berms</b>      |   |                     |                     |                             |
| Type              | Capacity                                    | Permeability (Wall) | Permeability (Base) | Maintenance                 |
| Earth             | Inadequate                                  | Walls Insufficient  | Base Insufficient   | Inadequate                  |
| Corrective Action | repair and maintain berms of adequate size. |                     |                     | Corrective Date: 01/31/2012 |

|                 |         |  |  |  |
|-----------------|---------|--|--|--|
| <b>Venting:</b> |         |  |  |  |
| Yes/No          | Comment |  |  |  |
|                 |         |  |  |  |

|                 |                             |         |                   |         |
|-----------------|-----------------------------|---------|-------------------|---------|
| <b>Flaring:</b> |                             |         |                   |         |
| Type            | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|                 |                             |         |                   |         |

**Predrill**

Location ID: 312598

**Site Preparation:**

Lease Road Adeq.: \_\_\_\_\_

Pads: \_\_\_\_\_

Soil Stockpile: \_\_\_\_\_

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

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

CDP Num.: \_\_\_\_\_

**Form 2A COAs:****Wildlife BMPs:****Stormwater:****Comment:** \_\_\_\_\_**Staking:****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:****Well**

Facility ID: 221992

API Number: 077-08594

Status: PR

Insp. Status: PR

**Environmental****Spills/Releases:**

Type of Spill: \_\_\_\_\_ Description: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_

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

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

Reportable: \_\_\_\_\_ GPS: Lat \_\_\_\_\_ Long \_\_\_\_\_

Proximity to Surface Water: \_\_\_\_\_ Depth to Ground Water: \_\_\_\_\_

**Water Well:**

DWR Receipt Num: \_\_\_\_\_ Owner Name: \_\_\_\_\_ GPS File: \_\_\_\_\_

**Field Parameters:**

Sample Location: \_\_\_\_\_

Emission Control Burner (ECB): \_\_\_\_\_

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

Pilot: \_\_\_\_\_ Wildlife Protection Devices (fired vessels): \_\_\_\_\_

**Reclamation - Storm Water - Pit****Interim Reclamation:**

Date Interim Reclamation Started: \_\_\_\_\_ Date Interim Reclamation Completed: \_\_\_\_\_

Land Use: \_\_\_\_\_

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

1003a. Debris removed? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Waste Material Onsite? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Unused or unneeded equipment onsite? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Pit, cellars, rat holes and other bores closed? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Guy line anchors removed? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Guy line anchors marked? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

1003b. Area no longer in use? \_\_\_\_\_ Production areas stabilized ? \_\_\_\_\_

1003c. Compacted areas have been cross ripped? \_\_\_\_\_

1003d. Drilling pit closed? \_\_\_\_\_ Subsidence over on drill pit? \_\_\_\_\_

Cuttings management: \_\_\_\_\_

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? \_\_\_\_\_

Production areas have been stabilized? \_\_\_\_\_ Segregated soils have been replaced? \_\_\_\_\_

**RESTORATION AND REVEGETATION**Cropland

Top soil replaced \_\_\_\_\_ Recontoured \_\_\_\_\_ Perennial forage re-established \_\_\_\_\_

Non-Cropland

Top soil replaced \_\_\_\_\_ Recontoured \_\_\_\_\_ 80% Revegetation \_\_\_\_\_

1003 f. Weeds Noxious weeds? \_\_\_\_\_

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

**Final Reclamation/ Abandoned Location:**

Inspector Name: BROWNING, CHUCK

Date Final Reclamation Started: \_\_\_\_\_

Date Final Reclamation Completed: \_\_\_\_\_

Final Land Use: \_\_\_\_\_

Reminder: \_\_\_\_\_

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

Well plugged \_\_\_\_\_

Pit mouse/rat holes, cellars backfilled \_\_\_\_\_

Debris removed \_\_\_\_\_

No disturbance /Location never built \_\_\_\_\_

Access Roads Regraded \_\_\_\_\_

Contoured \_\_\_\_\_

Culverts removed \_\_\_\_\_

Gravel removed \_\_\_\_\_

Location and associated production facilities reclaimed \_\_\_\_\_

Locations, facilities, roads, recontoured \_\_\_\_\_

Compaction alleviation \_\_\_\_\_

Dust and erosion control \_\_\_\_\_

Non cropland: Revegetated 80% \_\_\_\_\_

Cropland: perennial forage \_\_\_\_\_

Weeds present \_\_\_\_\_

Subsidence \_\_\_\_\_

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

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

Date

**Storm Water:**

Loc Erosion BMPs

BMP  
Maintenance

Lease Road Erosion  
BMPs

Lease BMP  
Maintenance

Chemical BMPs

Chemical BMP  
Maintenance

Comment

S/U/V: \_\_\_\_\_

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

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

CA: \_\_\_\_\_