

**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



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Inspection Date:

12/20/2011

Document Number:

663900250

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>207334</u>	<u>321574</u>		<u>QUINT, CRAIG</u>

Operator Information:OGCC Operator Number: 61250 Name of Operator: MULL DRILLING COMPANY INCAddress: 1700 N WATERFRONT PKWY B#1200City: WICHITA State: KS Zip: 67206-**Contact Information:**

Contact Name	Phone	Email	Comment
Smalley, Carl	719-767-8805 off	csmalley@mulldrilling.com	719-342-1812 cell

Compliance Summary:

QtrQtr:	<u>NWNE</u>	Sec:	<u>9</u>	Twp:	<u>14S</u>	Range:	<u>49W</u>
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/07/2008	200189534	PR	PR	S			N
12/17/2001	200022486	PR	PR	S		P	N
12/09/1997	500138420	ID	TA			P	N
12/05/2006	200100535	PR	PR	S		P	N
03/20/1995	500138417	ID	TA			P	
06/09/1998	500138421	ES	SI			P	N
10/29/2008	200197831	PR	PR	S			N
11/18/1994	500138416		SI				Y
04/19/1996	500138418	ID	TA			P	N
12/13/1999	500138422	ID	TA			P	N
12/11/2009	200224061	PR	PR	S			N
11/01/1997	500138419						
04/06/2010	200241597	PR	PR	S			N

Inspector Comment:

MUSF #3 CENTRAL BATTERY F/(MU #15, 17, 18, 19, 20)

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
207334	WELL	PR	02/01/2001	OW	017-06269	MULL UNIT 18	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Inspector Name: QUINT, CRAIG

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: _____	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

Lease Road:

Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory	SAND AND GRAVEL ROAD W/CATTLE GUARD AT LOCATION ENTRANCE.		

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	LEASE SIGN AT WELLHEAD.		
CONTAINERS	Satisfactory	PLACARDS ON BLOW DOWN TANKS.		
TANK LABELS/PLACARDS	Satisfactory	METAL SIGNS PLACED IN FRONT OF TANKS ON BERMS.		

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
LOCATION	Satisfactory	LOCATION WITH TANK BATTERY FENCED WITH WIRE.		

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Compressor	1	Satisfactory	SKID MOUNTED ELEC IN METAL SHED.		
Deadman # & Marked	4	Satisfactory			

Ancillary equipment		Unsatisfactory	ELEC PANEL, CATHOTIC RECTIFIER, 250 GAL BLOW DOWN TANK WITHOUT CONTAINMENT (1/2 FULL OF OILY FLUID) AT WELLHEAD. VAPOR RECOVERY COMP IN SHED, 2- CIRC PUMPS, MASTER CONTROL SHED, 300 GAL BLOW DOWN TANK W/O CONTAINMENT(EMPTY).	INSTALL CONTAINMENT	03/20/2012
Pump Jack	1	Satisfactory	160 PARKERSBURG		
Vertical Separator	1	Satisfactory	IN METAL SHED.		
Prime Mover	1	Satisfactory	ELEC MOTOR		
LACT	1	Satisfactory	WITH ELEC PANELS, OIL SALES PUMP , TELEMETRY EQUIPMENT OPERATED BY PLAINS.		
Veritcal Heater Treater	2	Satisfactory	WITH SHEDS		

Tanks/Berms: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	200 BBLS	Open Top	38.847930,-102.894130

S/U/V:	Satisfactory	Comment:	GREEN/BROWN OPEN TOP FIBERGLASS WITH ADEQUATE CHICKEN WIRE WILDLIFE SCREENING.
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Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficent	Base Sufficent	Adequate

Corrective Action		Corrective Date	
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Comment	BERMS COVERED WITH GRAVEL.
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Inspector Name: QUINT, CRAIG

Tanks/Berms:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	2	400 BBLS	STEEL AST	38.848360,-102.893960	
S/U/V:	Satisfactory	Comment:	GREEN/BROWN WITH DARK GREEN STRIPE.		
Corrective Action:				Corrective Date:	
Paint					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment		BERMS COVERED WITH GRAVEL.			
Venting:					
Yes/No		Comment			
YES		VAPOR RECOVERY COMPRESSOR IS RUNNING .			
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 321574

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: 207334 API Number: 017-06269 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 : _____ Lat _____ Long _____

Field Parameters:

Sample Location: _____

Inspector Name: QUINT, CRAIG

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? Pass CM _____
CA _____ CA Date _____
Waste Material Onsite? Pass CM _____
CA _____ CA Date _____
Unused or unneeded equipment onsite? Pass CM _____
CA _____ CA Date _____
Pit, cellars, rat holes and other bores closed? Pass CM _____
CA _____ CA Date _____
Guy line anchors removed? _____ CM _____
CA _____ CA Date _____
Guy line anchors marked? Pass CM _____
CA _____ CA Date _____

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

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

Cuttings management: _____

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

Production areas have been stabilized? Pass Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced Pass Recontoured Pass 80% Revegetation Pass

1003 f. Weeds Noxious weeds? _____ P _____

Comment: LOCATION AND BATTERY FENCED, UNUSED AREAS OUTSIDE OF FENCE ARE PASTURE GRASS.

Overall Interim Reclamation Pass

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: _____

Inspector Name: QUINT, CRAIG

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 _____

Overall Final Reclamation

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Gravel	Pass	Gravel	Pass	MHSP	Fail	

S/U/V: Unsatisfactory Corrective Date: 03/20/2012

Comment: 250 GAL BLOW DOWN TANK (1/2 FULL OF OILY FLUID) AT WELLHEAD. 300 GAL BLOW DOWN TANK AT BATTERY (EMPTY)

CA: INSTALL CONTAINMENT AT WELLHEAD, IF HYDROCARBONS ARE PRESENT IN BATTERY BLOW DOWN THEN CONTAINMENT WILL NEED TO BE INSTALLED.