

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
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Inspection Date: 12/20/2011

Document Number: 663900250

Overall Inspection: Satisfactory

FIELD INSPECTION FORM

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

OGCC Operator Number: 61250 Name of Operator: MULL DRILLING COMPANY INC

Address: 1700 N WATERFRONT PKWY B#1200

City: 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: NWNE Sec: 9 Twp: 14S Range: 49W

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

Equipment: Location Inventory

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
<input type="checkbox"/> 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.

Corrective Action: _____ Corrective Date: _____

Paint

Condition Adequate

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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

Corrective Action _____ Corrective Date _____

Comment BERMS COVERED WITH GRAVEL.

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: _____

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.