

**FORM  
INSP**Rev  
X/15**State of Colorado  
Oil and Gas Conservation Commission**1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109

Inspection Date:

09/27/2016

Submitted Date:

09/29/2016

Document Number:

680301156**FIELD INSPECTION FORM**
 Loc ID 313694 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 2A Doc Num:
**Operator Information:**OGCC Operator Number: 10203Name of Operator: BLACK RAVEN ENERGY INCAddress: 165 S UNION BLVD SUITE 410City: LAKEWOOD State: CO Zip: 80228**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED

**Findings:**5 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Wehrer, Gene		gwehrer@enerjexresources.com	
Koehler, Bob		bob.koehler@state.co.us	
Burn, Diana		diana.burn@state.co.us	
Hataway, Billy		bhataway@enerjexresources.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
224872	WELL	SI	12/20/1987	ERIW	087-05264	ADENA J SAND UNIT W-43	SI

**General Comment:**

MIT - UIC/MIT SATISFACTORY Casing pressure before start = 0. Casing pressure @ start = 330 psi. Casing pressure @ 5 min. = 330 psi.

Casing pressure @ 10 min. = 330 psi. Casing pressure @ 15 min. = 330 psi. Loss or Gain = 0. No problems found.

Form 21 attached - Form 42 attached. Operator requested test witness verbally via telephone on 9/23/2016, accepted by Field Inspector Schure. Form 42 waived/accepted prior to FIR due to computer problems on COGCC/COGIS.

**Location**

<b>Lease Road:</b>			
Type	Access		
comment:	Two track		
Corrective Action	L	Date:	

Overall Good: ☐

<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: ECN Satisfactory

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

Overall Good: ☒

<b>Spills:</b>					
Type	Area	Volume			

In Containment: No

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

☐ Multiple Spills and Releases?

<b>Equipment:</b>			corrective date
Type: Other	#		
Comment:	No change to surface equipment inventoried		
Corrective Action:		Date:	

**Venting:**

Yes/No			
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**Facility ID: 224872 Type: WELL API Number: 087-05264 Status: SI Insp. Status: SI**Underground Injection Control**

UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: \_\_\_\_\_

UIC Routine

Inj./Tube: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
 (e.g. 30 psig or -30" Hg) Inj Zone: JSND

TC: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ Last MIT: 09/29/2011

Brhd: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ AnnMTReq: \_\_\_\_\_

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

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

Method of Injection: \_\_\_\_\_

Test Type: 5 Year Tbg psi: \_\_\_\_\_ Csg psi: 330 BH psi: \_\_\_\_\_Insp. Status: Pass

Comment: Casing held 330 psi. throughout duration of 15 min. test. Loss or Gain = 0 psi. Test performed to maintain SI status.

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

**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
680301156	INSPECTION APPROVED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3964316">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3964316</a>
680301163	Form 21	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3964312">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3964312</a>