

**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:

09/29/2016

Submitted Date:

09/30/2016

Document Number:

680301176

FIELD INSPECTION FORM

Loc ID 312151 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:

OGCC Operator Number: 10380

Name of Operator: BENCHMARK ENERGY LLC

Address: PO BOX 8747

City: PRATT State: KS Zip: 67124

Status Summary:

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

Findings:

7 Number of Comments

0 Number of Corrective Actions

☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Burn, Diana		diana.burn@state.co.us	
Koehler, Bob		bob.koehler@state.co.us	
Quint, Craig		craig.quint@state.co.us	
Leonard, Mike		mike.leonard@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
219053	WELL	TA	01/01/1999	ERIW	075-05875	NW GRAYLIN (LOGAN J 12-2W) 2-W	TA

General Comment:

UIC/MIT to Maintain SI/TA status. Loaded (12) bbls. water Casing pressure @ start = 355 psi. Casing pressure @ 5 min. = 345 psi. Casing pressure @ 10 min. = 332 psi. Casing pressure @ 15 min. = 314 psi. Loss or Gain = -41 psi. Failure Form 21 attached

Location**Lease Road:**

Type	Access		
comment:	Two track		
Corrective Action:		Date:	

Overall Good: ☐**Signs/Marker:**

Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:	ECN COGCC		
Corrective Action:		Date:	

Overall Good: ☐**Spills:**

Type	Area	Volume		
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In Containment: No

Comment:

☐ Multiple Spills and Releases?**Equipment:**

Type: Other	# 0		corrective date
Comment:	No change in surface equipment inventoried		
Corrective Action:		Date:	

Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			
Corrective Action:		Date:	

Inspected FacilitiesFacility ID: 219053 Type: WELL API Number: 075-05875 Status: TA Insp. Status: TA**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: 06/16/2011

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: 314 BH psi: _____Insp. Status: Fail Leak Type: _____Comment: See comments pg. 1 Loss or Gain = - 41 psi. continued to fall Failure

Corrective Action: _____ Date: _____

Idle WellPurpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: _____Comment: MIT performed to maintain SI/TA status. Failed See comments pg. 1

Corrective Action: _____ Date: _____

COGCC Comments

Comment	User	Date
<u>See comments pg. 1</u>	schureky	09/30/2016

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

Document Num	Description	URL
680301177	Form 21	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3965905