

Location

Lease Road:

	Type Access		
comment:			
Corrective ActionL			Date:

Overall Good:

Signs/Marker:

	Type WELLHEAD		
Comment:			
Corrective Action:			Date:

Emergency Contact Number:

Comment:			
Corrective Action:			Date: _____

Overall Good:

Spills:

Type	Area	Volume			

In Containment: No

Comment: _____

Multiple Spills and Releases?

Equipment:

				corrective date
Type: Deadman # & Marked	# 4			
Comment:				
Corrective Action:				Date:
Type: Flow Line	# 1			
Comment:				
Corrective Action:				Date:
Type: Ancillary equipment	# 1			
Comment: Wellhead				
Corrective Action:				Date:
Type: Other	# 1			
Comment: 1000 Gallon Tank and Pump on Spill Prevention.				
Corrective Action:				Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type			
Comment:			

Corrective Action:

Date:

Inspected Facilities

Facility ID: 224222 Type: WELL API Number: 083-06287 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Corrective Action:

Date:

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Gravel	Pass	Gravel	Pass			
Compaction	Pass	Compaction	Pass			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT