

**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:

10/04/2016

Submitted Date:

10/05/2016

Document Number:

680401056**FIELD INSPECTION FORM**

Loc ID 312379 Inspector Name: BROWNING, CHUCK On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 53255Name of Operator: MARALEX RESOURCES, INCAddress: P O BOX 338City: IGNACIO State: CO Zip: 81137**Status Summary:**

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

Findings:3 Number of Comments1 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

| Contact Name | Phone | Email | Comment |
|-------------------|----------------|-----------------------------|-----------------|
| Labowskie, Steve | | steve.labowskie@state.co.us | |
| Browning, Chuck | 970-433-4139 | chuck.browning@state.co.us | Field Inspector |
| Tahmahkera, Kerry | (970) 563-4000 | maralextech@gmail.com | All Inspections |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|--------------------|-------------|
| 221418 | WELL | SI | 08/01/1987 | GW | 077-08018 | FEDERAL 9-1-10-100 | TA |

General Comment:

Location

| | | | |
|--------------------|--------|-------|--|
| Lease Road: | | | |
| Type | Main | | |
| comment: | | | |
| Corrective Action | L | Date: | |
| Type | Access | | |
| comment: | | | |
| Corrective Action | L | Date: | |

Overall Good: ☒

| | | | |
|----------------------|----------------------|-------|--|
| Signs/Marker: | | | |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

| | | | |
|---------------------------|----------------------|----------------------|--|
| Emergency Contact Number: | | | |
| Comment: | <input type="text"/> | | |
| Corrective Action: | <input type="text"/> | | |
| | Date: | <input type="text"/> | |

Overall Good: ☒

| | | | |
|----------------|------|--------|--|
| Spills: | | | |
| Type | Area | Volume | |

In Containment: No

Comment: ☐ Multiple Spills and Releases?

| | | | |
|--------------------|----------|-------|--|
| Fencing/: | | | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

| | | | |
|--------------------|----|-------|--|
| Venting: | | | |
| Yes/No | NO | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

| | | | |
|--------------------|--|-------|--|
| Flaring: | | | |
| Type | | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

| Inspected Facilities | | | | | | | | | |
|----------------------|--------|--|------|---|-----------|-------------------------------|------------------|---------------|----|
| Facility ID: | 221418 | Type: | WELL | API Number: | 077-08018 | Status: | SI | Insp. Status: | TA |
| Idle Well | | | | | | | | | |
| Purpose: | | <input type="checkbox"/> Shut In | | <input checked="" type="checkbox"/> Temporarily Abandoned | | Reminder: PREVIOUS INSPECTION | | | |
| Comment: | | <div>Well shut in 1987. No MIT on record. Action required inspection doc# 680400588 submitted 5/24/2016.</div> | | | | | | | |
| Corrective Action: | | <div>Contact COGCC Underground Injection Control Engineer if over 5 year date or Fails MIT.</div> | | | | | Date: 10/20/2016 | | |