

**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:

10/11/2016

Submitted Date:

10/12/2016

Document Number:

675203391**FIELD INSPECTION FORM**
 Loc ID 312607 Inspector Name: CONKLIN, CURTIS 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:**6 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Ellsworth, Stuart		Stuart.ellsworth@state.co.us	<a href="#">Engineering Supervisor</a>
Giboo, David	(970) 319-2211	dgiboo@blm.com	<a href="#">Lead Petroleum Engineering Tech</a>
Tahmahkera, Kerry	(970) 563-4000	maralextech@gmail.com	<a href="#">All Inspections</a>
O'Hare, Mickey	(970) 563-4000/ (719) 429-3529	amohare@maralexinc.com	<a href="#">All Inspections</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
222009	WELL	SI	10/01/1995	GW	077-08611	SOUTH SHALE RIDGE 5-21	SI

**General Comment:**

[Follow up to inspection Doc#675202730. Correspondence for extension of the expiration of the NOI to plug on file Doc#2597221](#)

**Location**Overall Good: ☐**Signs/Marker:**

Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

**Emergency Contact Number:**

Comment:

Corrective Action:  Date:

Overall Good: ☐**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Tanks and Berms:**

Contents	#	Capacity	Type	Tanak ID	SE GPS
PRODUCED WATER	1	300 BBLS	Open Top		,
Comment:					
Corrective Action:					Date:

**Paint**

Condition	Adequate	
Other (Content)		
Other (Capacity)		
Other (Type)		

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficent	Base Sufficent	Adequate
Comment:				
Corrective Action:				Date:

**Venting:**

Yes/No	NO	
Comment:		
Corrective Action:		Date:

**Flaring:**

Type	
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Comment:			
Corrective Action:		Date:	

Inspected Facilities									
Facility ID:	222009	Type:	WELL	API Number:	077-08611	Status:	SI	Insp. Status:	SI
Idle Well									
Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned      Reminder: _____									
Comment: <input type="text" value="Last produced April 2010"/>									
Corrective Action: <input type="text"/> Date: _____									