



**Location**

Overall Good:

**Signs/Marker:**

Type	WELLHEAD		
Comment:	Corrective action completed		
Corrective Action:		Date:	

Emergency Contact Number:

Comment:		Date:	
Corrective Action:			

Overall Good:

**Spills:**

Type	Area	Volume		
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In Containment: No

Comment:

Multiple Spills and Releases?

**Equipment:**

Type: Prime Mover	# 1		corrective date
Comment:	Corrective action completed		
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:	Corrective action completed.		
Corrective Action:		Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tanak ID	SE GPS
PRODUCED WATER	1	OTHER	STEEL AST		,
Comment:	Corrective action completed.				
Corrective Action:				Date:	

**Paint**

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

**Berms**

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

**Venting:**

Yes/No		
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Comment:			
Corrective Action:		Date:	

**Flaring:**

Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**

Facility ID: 215648 Type: WELL API Number: 067-07253 Status: PR Insp. Status: PR