

**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:

11/01/2016

Submitted Date:

11/01/2016

Document Number:

673403820**FIELD INSPECTION FORM**

Loc ID      Inspector Name:      On-Site Inspection ☐  
 313338      Waldron, Emily      2A Doc Num: \_\_\_\_\_

**Operator Information:**OGCC Operator Number: 10396Name of Operator: SWN PRODUCTION COMPANY LLCAddress: PO BOX 12359City: SPRING      State: TX      Zip: 77391**Status Summary:**

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

**Findings:**3 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Rowell, Cheryl	713-542-0648	Cheryl_Rowell@swn.com	<a href="#">Senior Regulatory Analyst</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
288114	WELL	TA	11/14/2012	GW	081-07362	ADAIRSVILLE 13-1	TA

**General Comment:**

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

Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

**Emergency Contact Number:**

Comment:	1-877-879-0376	Date:	
Corrective Action:			

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Fencing/:**

Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

**Equipment:**

Type: Deadman # & Marked	# 4		corrective date
Comment:			
Corrective Action:		Date:	

**Venting:**

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities									
Facility ID:	288114	Type:	WELL	API Number:	081-07362	Status:	TA	Insp. Status:	TA
Idle Well									
Purpose: <input type="checkbox"/> Shut In <input checked="" type="checkbox"/> Temporarily Abandoned									
Reminder: _____									
Comment: _____									
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

Comment: [No apparent soil migration; erosion or soil movement.](#)

Corrective Action:

Date: \_\_\_\_\_

**Pits:** ☐ NO SURFACE INDICATION OF PIT

**Attached Documents**

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

Document Num	Description	URL
673403820	INSPECTION SUBMITTED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3991912">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3991912</a>