

**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:

03/14/2017

Submitted Date:

03/20/2017

Document Number:

680301777

FIELD INSPECTION FORM

Loc ID 303499 Inspector Name: SCHURE, KYM On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

OGCC Operator Number: 10489
Name of Operator: AUGUSTUS ENERGY RESOURCES LLC
Address: 2016 GRAND AVENUE #A
City: BILLINGS State: MT Zip: 59102

Findings:

7 Number of Comments
0 Number of Corrective Actions
 Corrective Action Response Requested

Contact Information:

| Contact Name | Phone | Email | Comment |
|--------------|--------------|---------------------------|---------|
| Davis, Loni | 970-332-3585 | ldavis@augustusenergy.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 253199 | WELL | PR | 12/30/1999 | GW | 125-07076 | KORF 2 | PR |

General Comment:

[Routine Site Inspection FIR](#)

Large empty text area for additional comments or notes.

Location

| | | | |
|--------------------|------------------------------------|--|-------|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Located within rotational cropland | | |
| Corrective ActionL | | | Date: |

Overall Good:

| | | | |
|----------------------|--------------|--|-------|
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | Satisfactory | | |
| Corrective Action: | | | Date: |

| | | | |
|----------------------------------|--------------|--|-------------|
| Emergency Contact Number: | | | |
| Comment: | Satisfactory | | |
| Corrective Action: | | | Date: _____ |

Overall Good:

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

In Containment: No

Comment: _____

Multiple Spills and Releases?

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

| | | | |
|--------------------------|------------|--|-----------------|
| Equipment: | | | corrective date |
| Type: Gas Meter Run | # 1 | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Vertical Separator | # 1 | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Prime Mover | # 0 | | |
| Comment: | Flowing GW | | |
| Corrective Action: | | | Date: |

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

| | | | |
|-----------------|--|--|--|
| Flaring: | | | |
| Type | | | |

| | | |
|--------------------|-------|--|
| Comment: | | |
| Corrective Action: | Date: | |

Inspected Facilities

Facility ID: 253199 Type: WELL API Number: 125-07076 Status: PR Insp. Status: PR

Producing Well

Comment: [Flowing GW](#)

Corrective Action:

Date: