

**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:

06/15/2017

Submitted Date:

06/15/2017

Document Number:

679902648**FIELD INSPECTION FORM**

Loc ID 321111 Inspector Name: Welsh, Brian On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 61650Name of Operator: MURFIN DRILLING COMPANY INCAddress: 250 N WATER ST STE 300City: WICHITA State: KS Zip: 67202**Status Summary:**

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

Findings:7 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Quint, Craig		craig.quint@state.co.us	
Esquivel, James	620-272-4913	j280189@pld.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
206073	WELL	IJ	03/02/1994	ERIW	009-06489	S E CAMPO UNIT 1101W	AC

General Comment:[Routine UIC Inspection](#)

Location

Lease Road:			
Type	Access		
comment:	Gravel road through pasture		
Corrective Action		Date:	

Overall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:	Lease sign by wellhead		
Corrective Action:		Date:	

Emergency Contact Number:			
Comment:			
Corrective Action:			
	Date:		

Overall Good: ☒

Spills:					
Type	Area	Volume			

In Containment: No

Comment: ☐ Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:	Pipe fence around wellhead and cathodic rectifier		
Corrective Action:		Date:	

Equipment:			corrective date
Type: Ancillary equipment	# 3		
Comment:	Wellhead w/water meter, electric panel, cathodic rectifier		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS	
			CENTRALIZED BATTERY		37.031760,-102.549700	
Comment:	Central tank battery 1430' N					
Corrective Action:						Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
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Comment:					
Corrective Action:					Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type			
Comment:			
Corrective Action:			Date:

Inspected FacilitiesFacility ID: 206073 Type: WELL API Number: 009-06489 Status: IJ Insp. Status: AC**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC RoutineInj./Tube: Pressure or inches of Hg -3" HG Previous Test Pressure _____ MPP _____

(e.g. 30 psig or -30" Hg)

Inj Zone: LNSNGTC: Pressure or inches of Hg 0 PSIG Previous Test Pressure _____ Last MIT: 07/27/2016Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: NOComment: CASING HAD A LIGHT PUFF THAT DIED IMMEDIATELY. TBG IJ @ -3" HG

Corrective Action: _____ Date: _____

Method of Injection: PUMP FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

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
Compaction	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass			

Comment:

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT