

**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:

06/16/2017

Submitted Date:

06/16/2017

Document Number:

679902656

FIELD INSPECTION FORM

Loc ID 321116 Inspector Name: Welsh, Brian 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: 10330
Name of Operator: INVESTMENT EQUIPMENT LLC
Address: 412 W PLATTE AVE
City: FT MORGAN State: CO Zip: 80701

Findings:

- 8 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

Contact Information:

| Contact Name | Phone | Email | Comment |
|--------------|-------|-----------------------------|---------|
| Quint, Craig | | craig.quint@state.co.us | |
| Rebol, Dave | | investmentequipment@cox.net | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 206082 | WELL | IJ | 11/12/2015 | ERIW | 009-06498 | TSRU 206W | AC |

General Comment:

[Routine UIC Inspection](#)

Location

| | | | |
|--------------------|---------------------------|-------|--|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Two track through pasture | | |
| Corrective Action: | | Date: | |

Overall Good:

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

| | | | |
|----------------------------------|--|--|-------------|
| Emergency Contact Number: | | | |
| Comment: | <input style="width: 95%;" type="text"/> | | |
| Corrective Action: | <input style="width: 95%;" type="text"/> | | Date: _____ |

Overall Good:

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

In Containment: No

Comment:

Multiple Spills and Releases?

| | | | |
|--------------------|--|-------|--|
| Fencing/: | | | |
| Type | OTHER | | |
| Comment: | Pipe fence around REA pole with cathodic rectifier | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | Pipe fence around wellhead | | |
| Corrective Action: | | Date: | |

| | | | |
|---------------------------|---|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Ancillary equipment | # 2 | | |
| Comment: | Electric panel and cathodic rectifier on REA pole south of wellhead | | |
| Corrective Action: | | Date: | |

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

| | | | |
|--------------------|--|-------|--|
| Flaring: | | | |
| Type | | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Inspected Facilities

Facility ID: 206082 Type: WELL API Number: 009-06498 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

| | | | |
|------------|--|------------------------------|-----------------------------|
| Inj./Tube: | Pressure or inches of Hg <u>-22" HG</u> (e.g. 30 psig or -30" Hg) | Previous Test Pressure _____ | MPP _____ |
| TC: | Pressure or inches of Hg <u>0 PSIG</u> | Previous Test Pressure _____ | Inj Zone: <u>LNSNG</u> |
| Brhd: | Pressure or inches of Hg _____ | Previous Test Pressure _____ | Last MIT: <u>08/15/2013</u> |
| | | | AnnMTReq: <u>NO</u> |

Comment: CASING HAD LIGHT BLOW THAT DIED IMMEDIATELY. TBG IJ @ -22" 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 | | | |

Comment: [Location and access are grassed over](#)

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT