

**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:

06/19/2017

Submitted Date:

06/21/2017

Document Number:

680302050**FIELD INSPECTION FORM**

Loc ID 313906 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10203Name of Operator: BLACK RAVEN ENERGY INCAddress: 165 S UNION BLVD SUITE 410City: LAKEWOOD State: CO Zip: 80228**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 | |
| Wehrer, Gene | | gwehrer@enerjexresources.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|----------------|-------------|
| 227084 | WELL | IJ | 11/11/1911 | ERIW | 087-07827 | Nichols 13A-24 | SI |

General Comment:UIC Routine Inspection

Location

| | | | |
|--------------------|--------------|-------|--|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Satisfactory | | |
| Corrective Action: | | 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?

| | | | |
|--------------------|------------------------------------|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Other | # 0 | | |
| Comment: | No change in equipment inventoried | | |
| Corrective Action: | | Date: | |

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

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

Inspected FacilitiesFacility ID: 227084 Type: WELL API Number: 087-07827 Status: IJ Insp. Status: SI**Underground Injection Control**

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg 0 Previous Test Pressure _____ MPP _____
(e.g. 30 psig or -30" Hg) Inj Zone: JSND

TC: Pressure or inches of Hg 0 Previous Test Pressure _____ Last MIT: 05/01/2013

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: No problems found

Corrective Action: _____ Date: _____

Method of Injection: _____

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 |
| Other | In Process | Other | In Process | | | |

Comment: Continue BMP's

Corrective Action:

Date:

Pits: ☐ NO SURFACE INDICATION OF PIT