



**Location**

Overall Good:

**Signs/Marker:**

	Type WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:			
Corrective Action:			Date: _____

Overall Good:

**Spills:**

Type	Area	Volume			

In Containment: No

Comment:

Multiple Spills and Releases?

**Equipment:**

					corrective date
Type: Gas Meter Run	# 1				
Comment:					
Corrective Action:				Date:	
Type: Compressor	# 1				
Comment:					
Corrective Action:				Date:	
Type: Vertical Separator	# 2				
Comment:					
Corrective Action:				Date:	
Type: Deadman # & Marked	# 5				
Comment:					
Corrective Action:				Date:	
Type: Progressive Cavity	# 1				
Comment:					
Corrective Action:				Date:	

**Venting:**

Yes/No			
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**

Facility ID: 279989 Type: WELL API Number: 071-08535 Status: PA Insp. Status: PA

Facility ID: 292297 Type: WELL API Number: 071-09388 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

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
Gravel	Pass	Gravel	Pass			

Comment:

Corrective Action:

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

**Pits:**     NO SURFACE INDICATION OF PIT

Permit:	Facility ID	Permit Num	Expiration Date
	338404	1942723	
	412384	1943714	