

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?

Fencing/:

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

Equipment:

| | | | | | corrective date |
|--------------------------|-----|--|--|--|-----------------|
| Type: Deadman # & Marked | # 4 | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |
| Type: Progressive Cavity | # 1 | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |
| Type: Gas Meter Run | # 1 | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |
| Type: Vertical Separator | # 1 | | | | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |

Venting:

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

Flaring:

| | | | |
|----------|--|--|--|
| Type | | | |
| Comment: | | | |

Corrective Action:

Date:

Inspected Facilities

Facility ID: 290432 Type: WELL API Number: 071-09264 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

Type: Produced Water Lined: NO Pit ID: Lat: Long:

Reference Point: _____ Other: _____ Length: _____ Width: _____

Lining:

Liner Type: Liner Condition:

Comment:

Corrective Action

Date: c

Fencing:

Fencing Type: Livestock Fencing Condition: Adequate

Comment:

Corrective Action

Date:

Netting:

Netting Type: Netting Condition:

Comment:

Corrective Action

Date:

Anchor Trench Present: Oil Accumulation: NO 2+ feet Freeboard: YES

Comment: 30' x 70'

Corrective Action

Date:

| | | | |
|---------|-------------|------------|-----------------|
| Permit: | Facility ID | Permit Num | Expiration Date |
| | 291900 | 1881302 | |

| | | |
|-------------|-----------------|----------|
| Monitoring: | Monitoring Type | Comment` |
| | Chain | |