



**Location**

Overall Good:

**Signs/Marker:**

Type	CONTAINERS		
Comment:	Adequate		
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:	Adequate		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:	Adequate		
Corrective Action:		Date:	

**Emergency Contact Number:**

Comment:	Adequate	Date:	
Corrective Action:		Date:	

Overall Good:

**Spills:**

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

**Fencing/:**

Type	LOCATION		
Comment:	Chain link		
Corrective Action:		Date:	

**Equipment:**

Type:	#		corrective date
Comment:	No change from previous inspection		
Corrective Action:		Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
Comment:	No change from previous inspection				
Corrective Action:		Date:			

**Paint**

Condition	<input type="text"/>
Other (Content)	<input type="text"/>
Other (Capacity)	<input type="text"/>
Other (Type)	<input type="text"/>

<b>Berms</b>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Concrete	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment: <a href="#">No change from previous inspection</a>				
Corrective Action:				Date:

<b>Venting:</b>				
Yes/No	NO			
Comment:				
Corrective Action:				Date:

<b>Flaring:</b>				
Type				
Comment:				
Corrective Action:				Date:

**Inspected Facilities**

Facility ID: 433829 Type: WELL API Number: 123-37808 Status: IJ Insp. Status: IJ

**Underground Injection Control**

UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: \_\_\_\_\_

UIC Routine

Inj./Tube:	Pressure or inches of Hg <u>1600</u>	Previous Test Pressure _____	MPP _____
	(e.g. 30 psig or -30" Hg)		Inj Zone: <u>DJINJ</u>
TC:	Pressure or inches of Hg <u>0</u>	Previous Test Pressure _____	Last MIT: <u>05/08/2014</u>
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	AnnMTReq: <u>NO</u>

Comment:

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
Culverts	Pass					
Gravel	Pass	Gravel	Pass			
Compaction	Pass	Compaction	Pass	Material Handling And Spill Prevention	Pass	

Comment:

Corrective Action:

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

**Pits:**  NO SURFACE INDICATION OF PIT