

**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:

10/11/2017

Submitted Date:

10/11/2017

Document Number:

679903169

FIELD INSPECTION FORM

Loc ID 324844 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: 83130
Name of Operator: STRACHAN EXPLORATION INC
Address: 383 INVERNESS PKWY, STE 360
City: ENGLEWOOD State: CO Zip: 80112

Findings:

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

Contact Information:

Contact Name	Phone	Email	Comment
Strachan, Steve	(303) 785-7006	sms@strachanexploration.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
213092	WELL	PR	05/01/2017	GW	061-06453	AMYX 1	PR

General Comment:

Location			
Lease Road:			
Type	Access		
comment:	Two track through pasture		
Corrective Action:			Date:
Overall Good: <input checked="" type="checkbox"/>			
Signs/Marker:			
Type	TANK LABELS/PLACARDS		
Comment:	Stickers on tanks		
Corrective Action:			Date:
Type	WELLHEAD		
Comment:	Lease sign by wellhead		
Corrective Action:			Date:
Type	BATTERY		
Comment:	Lease sign at tank battery		
Corrective Action:			Date:
Emergency Contact Number:			
Comment:	<input type="text"/>		
Corrective Action:	<input type="text"/>		Date: _____
Overall Good: <input checked="" type="checkbox"/>			
Spills:			
Type	Area	Volume	
In Containment: No			
Comment:	<input type="text"/>		
<input type="checkbox"/> Multiple Spills and Releases?			
Fencing/:			
Type	TANK BATTERY		
Comment:	Wire fence around tank battery		
Corrective Action:			Date:
Type	SEPARATOR		
Comment:	Wire fence where old separator used to be		
Corrective Action:			Date:
Type	WELLHEAD		
Comment:	Pipe fence around wellhead		
Corrective Action:			Date:
Equipment:			
Type:	Ancillary equipment	# 0	corrective date
Comment:	<input type="text"/>		
Corrective Action:			Date:

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

Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 213092 Type: WELL API Number: 061-06453 Status: PR Insp. Status: PR

Producing Well

Comment: [Producing](#)

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:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT