

**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:

11/16/2017

Submitted Date:

11/16/2017

Document Number:

679903468

**FIELD INSPECTION FORM**

Loc ID 321780 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: 51065  
Name of Operator: LOEB LLC\* HERMAN L  
Address: P O BOX 838  
City: LAWRENCEVILLE State: IL Zip: 62439

**Findings:**

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

**Contact Information:**

Contact Name	Phone	Email	Comment
Pelton, Shane	620-617-5870	shane@loeboil.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
207988	WELL	SI	10/10/2012	OW	017-06923	FUNK TRUST 42-13 2	TA

**General Comment:**

[Routine Inspection. Submit Form 4 to show current status TA](#)

**Location**

<b>Lease Road:</b>			
Type	Access		
comment:	Dirt road through farm ground		
Corrective Action			Date:

Overall Good:

<b>Signs/Marker:</b>			
Type	BATTERY		
Comment:	Lease sign at tank battery		
Corrective Action:			Date:
Type	WELLHEAD		
Comment:	Lease sign by wellhead		
Corrective Action:			Date:
Type	TANK LABELS/PLACARDS		
Comment:	Stickers on tanks		
Corrective Action:			Date:

Emergency Contact Number:			
Comment:	<input type="text"/>		
Corrective Action:	<input type="text"/>		Date: _____

Overall Good:

<b>Spills:</b>			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

<b>Equipment:</b>				corrective date
Type:	Pump Jack	# 0		
Comment:	Removed from location			
Corrective Action:				Date:
Type:	Deadman # & Marked	# 4		
Comment:				
Corrective Action:				Date:
Type:	Ancillary equipment	# 2		
Comment:	Electric panel and cathodic rectifier			
Corrective Action:				Date:
Type:	Compressor	# 0		
Comment:	Removed from location			
Corrective Action:				Date:
Type:	Vertical Heater Treater	# 1		

Comment:		
Corrective Action:		Date:

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	2	400 BBLs	STEEL AST		38.666650,-102.069720
Comment:					
Corrective Action:					Date:

**Paint**

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment:				
Corrective Action:				Date:

**Venting:**

Yes/No	
Comment:	
Corrective Action:	Date:

**Flaring:**

Type	
Comment:	
Corrective Action:	Date:

**Inspected Facilities**

Facility ID: 207988 Type: WELL API Number: 017-06923 Status: SI Insp. Status: TA

**Idle Well**

Purpose:  Shut In  Temporarily Abandoned Reminder: \_\_\_\_\_

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
Gravel	Pass	Compaction	Pass			

Comment:

Corrective Action:

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

**Pits:**     NO SURFACE INDICATION OF PIT