



OIL & GAS CONSERVATION COMMISSION
EAST REGION FIELD INSPECTION REPORT

NOTICE OF UNSATISFACTORY INSPECTION
 NOTICE OF SATISFACTORY INSPECTION

337 Cambridge
 Brush, CO 80723 970-842-4465

Date: 1-13-00	Facility ID:	Operator: Siler STA
Location: SENW 9-9N-61W		Lease Name: Gillette 12
API Number: 05-123-05692		Inspector: ED BINKLEY Cell: 970-380-2683
INSP TYPE: HR	INSP STATUS: PA	PA Y <input checked="" type="radio"/> N <input type="radio"/>
PASS/FAIL P <input checked="" type="radio"/> F <input type="radio"/>	VIOLATION <input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/>	NOV Y <input type="radio"/> N <input type="radio"/>
UIC VIOL TYPE UA MI OP PA OT	TBG/PKR LK <input type="checkbox"/>	CSG LK <input type="checkbox"/>

ALL UIC VIOLATIONS REQUIRE NOAYS

Well ID Signs (Rule 210) Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Comments:	Fences Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Comments:
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Production Pits (Rule 902, 903, 904) EARTHEN PITS ONLY	Produced Water Pits Total # _____ Oil Accumulation? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
	Skimming/Settling Pits Total # _____ Covered # _____ Uncovered # _____
	Special Purpose Pits Total # _____ Lined # _____ Unlined # _____
	SENSITIVE AREA <input type="checkbox"/> YES <input type="checkbox"/> NO

Tank Battery Equipment (Rule 604)	BURIED OR PARTIALLY BURIED VESSELS: #STEEL _____ #FIBERGLASS _____ #CONCRETE _____ #OTHER _____
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Fire Walls/Berms/Dikes (Rule 604.a.(4))	<input type="checkbox"/>
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General Housekeeping (Rule 603.g)	<input type="checkbox"/>
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Spills (Oil/Water) (Rule 906)	<input type="checkbox"/>
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UIC Routine Inspection FILL OUT FORM 21 WHEN WITNESSING MIT	Inj. Pressure _____ Psig T-C Ann. Pressure _____ Psig	COMMENTS
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Drilling Well/Workover (Rule 317)	<input type="checkbox"/>
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Surface Rehabilitation (Rule 1003, 1004)	Cement base near this location - (treater?) Grassland	<input type="checkbox"/>
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Miscellaneous	<input type="checkbox"/>
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CORRECTIVE ACTION REQUIRED:

Date Corrective Action Required By: _____ Date Remedied: _____

This report is a Notice of Inspection. The Commission requires that you correct any deficiencies shown on this report in a timely manner. Failure to comply may result in enforcement action by the Commission.