



02353217

# DO OIL & GAS CONSERVATION COMMISSION NORTHEAST REGION INSPECTION REPORT



<input type="checkbox"/> NOTICE OF UNSATISFACTORY INSPECTION	337 CAMBRIDGE STREET
<input checked="" type="checkbox"/> NOTICE OF SATISFACTORY INSPECTION	BRUSH, CO 80723 (970)-842-4465

API No. 05- 001 - 07413	LEASE NAME: <i>Danford 1-17</i>
LOCATION: <i>NESE 17-35-57W</i>	OPERATOR: <i>Historical</i>
DATE: <i>10-25-99</i>	INSPECTOR: ED BINKLEY MOBIL (970)-380-2683

INSP TYPE <i>HR</i>	INSP STATUS <i>DA</i>	PA <input checked="" type="checkbox"/> N	PASS/FAIL <input checked="" type="checkbox"/> F	VIOLATION Y N	NOV Y N
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UIC VIOL TYPE	UA <input type="checkbox"/>	MI <input type="checkbox"/>	OP <input type="checkbox"/>	PA <input type="checkbox"/>	OT <input type="checkbox"/>	TBG/PKR LK <input type="checkbox"/>	CSG LK <input type="checkbox"/>	ALL UIC VIOLATIONS REQUIRE NOAVS
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Well ID Signs (Rule 210) <input type="checkbox"/>	Fences (Rule 604.C.(3), 1003.A) <input type="checkbox"/>
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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
	SKIMMING/SETTLING PITS TOTAL # _____	COVERED # _____ UNCOVERED # _____
	SPECIAL PURPOSE PITS TOTAL # _____	LINED # _____ UNLINED # _____
	COMMENTS/SIZE _____	
SENSITIVE AREA <input type="checkbox"/> YES <input type="checkbox"/> NO		

Tank Battery Equipment (Rule 604)	<input type="checkbox"/>
BURIED OR PARTIALLY BURIED VESSELS : #STEEL #FIBERGLASS #CONCRETE #OTHER	

Fire Walls/Berms/Dikes (Rule 604)	<input type="checkbox"/>
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General Housekeeping (Rule 603.G)	<i>NOV 30 1999</i> <input type="checkbox"/>
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Spills (Oil/Water) (Rule 908)	<input type="checkbox"/>
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UIC ROUTINE INSPECTION FILL OUT FORM 21 WHEN WITNESSING MIT	INJ PRESSURE _____ PSIG	COMMENTS
	T-C ANN PRESSURE _____ PSIG	
	BRHD PRESSURE _____ PSIG	

Drilling Well/Workover (Rule 315)	<input type="checkbox"/>
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Surface Rehabilitation (Rule 317)	<i>[Signature]</i> <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.