

**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:

03/05/2018

Submitted Date:

03/05/2018

Document Number:

689500628**FIELD INSPECTION FORM**Loc ID 316039 Inspector Name: GRANAHAN, KYLE On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 200502Name of Operator: 31 OPERATINGAddress: 3021 RIDGE RD #156City: ROCKWALL State: TX Zip: 75032**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED

**Findings:**8 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
, Sutherland		msutherland@31operating.com	Rangely area wells
Freeman, Kris	972-810-1031	kfreeman@31operating.com	Rangely area wells

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
231968	WELL	PR	04/01/2014	GW	103-09639	PUCKETT 34-8	PR

**General Comment:**On location to conduct routine inspection

**Location**Overall Good: ☒**Signs/Marker:**

Type	WELLHEAD		
Comment:	Present/complete - previous operator information present at time of inspection.		
Corrective Action:		Date:	
Type	BATTERY		
Comment:	Present/complete - previous operator information present at time of inspection.		
Corrective Action:		Date:	

Emergency Contact Number:

Comment: Present/complete - previous operator information present at time of inspection. 877-352-4660

Corrective Action:

Date:

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment:

☐ Multiple Spills and Releases?**Fencing/:**

Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

**Equipment:**

		corrective date
Type: Gas Meter Run	# 1	
Comment:		
Corrective Action:		Date:
Type: Deadman # & Marked	# 4	
Comment:		
Corrective Action:		Date:
Type: Bird Protectors	# 1	
Comment:		
Corrective Action:		Date:
Type: Horizontal Heated Separator	# 1	
Comment:		
Corrective Action:		Date:

**Venting:**

Yes/No	NO	
Comment:		
Corrective Action:		Date:

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

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Inspected Facilities									
Facility ID:	231968	Type:	WELL	API Number:	103-09639	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	PR - via natural lift, no leaks/venting at time of inspection.								
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			
		Gravel	Pass			
Gravel	Pass					

Comment: [No sediment flow evident - snow cover present](#)

Corrective Action:

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

**Pits:** ☐ NO SURFACE INDICATION OF PIT

Permit:	Facility ID	Permit Num	Expiration Date
	434290	400314882	

**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
689500629	Location	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4393757">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4393757</a>