



ADO OIL & GAS CONSERVATION COMMISSION

NORTHEAST REGION FIELD INSPECTION REPORT

<input type="checkbox"/> NOTICE OF UNSATISFACTORY INSPECTION <input checked="" type="checkbox"/> NOTICE OF SATISFACTORY INSPECTION	337 Cambridge Brush, CO 80723 970-842-4465
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Date: <i>10-18-01</i>	Facility ID:	Operator: <i>Monahan</i>
Location: <i>SESE 16-2N-52W</i>		Lease Name: <i>Yeaman 5-1</i>
API Number: <i>05-121-06972</i>		Inspector: ED BINKLEY Cell: 970-380-2683
INSP TYPE: <i>HR</i>	INSP STATUS: <i>PA</i>	PA: <input checked="" type="checkbox"/> N: <input type="checkbox"/>
		PASS/FAIL: <input checked="" type="checkbox"/> F: <input type="checkbox"/>
		VIOLATION: Y: <input checked="" type="checkbox"/> NOV: Y: <input checked="" type="checkbox"/>
UIC VIOL TYPE: UA MI OP PA OT	TBG/PKR LK: <input type="checkbox"/>	CSG LK: <input type="checkbox"/>

ALL UIC VIOLATIONS REQUIRE NOAVS

Well ID Signs (Rule 210) Y <input type="checkbox"/> N <input type="checkbox"/>	Fences Y <input type="checkbox"/> N <input type="checkbox"/>
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Production Pits (Rule 902, 903, 904) EARTHEN PITS ONLY SENSITIVE AREA <input type="checkbox"/> YES <input type="checkbox"/> NO	Produced Water Pits Total # _____ Oil Accumulation? <input type="checkbox"/> YES <input type="checkbox"/> NO Comments: _____ Skimming/Settling Pits Total # _____ Covered # _____ Uncovered # _____ Comments: _____ Special Purpose Pits Total # _____ Lined # _____ Unlined # _____ Comments: _____
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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 <div style="text-align: right; font-size: small; opacity: 0.5;"> RECEIVED 10/18/01 10/18/01 </div>
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Drilling Well/Workover (Rule 317)	<input type="checkbox"/>
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Surface Rehabilitation (Rule 1003, 1004)	<i>grass ✓</i>
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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.