

**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:

05/10/2018

Submitted Date:

05/10/2018

Document Number:

677900308

**FIELD INSPECTION FORM**

Loc ID 321062 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: 10626  
Name of Operator: DOVER ATWOOD CORPORATION  
Address: 1875 HARSH AVENUE SE  
City: MASSILLON State: OH Zip: 44646

**Findings:**

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

**Contact Information:**

| Contact Name    | Phone          | Email                  | Comment |
|-----------------|----------------|------------------------|---------|
| Crane, Rocky    | (719) 529-0682 | rockycrane@yahoo.com   |         |
| Levengood, John | (330) 809-0630 | jlevengood07@gmail.com |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 205924      | WELL | PR     | 12/01/2016  | GW         | 009-06339 | TATE A 1      | PR          |

**General Comment:**

[Routine Inspection](#)

| <b>Location</b>  |  |        |                 |
|--|--|--------|-----------------|
| <b>Lease Road:</b>                                     |  |        |                 |
| Type   | Access   |        |                 |
| comment:   | Trail through farm ground  |        |                 |
| Corrective Action                                      |  |        | Date:           |
| Overall Good: <input checked="" type="checkbox"/>      |  |        |                 |
| <b>Signs/Marker:</b>                                   |  |        |                 |
| Type   | WELLHEAD   |        |                 |
| Comment:   | Install lease sign at wellhead   |        |                 |
| Corrective Action:                                     |  |        | Date:           |
| Type   | BATTERY  |        |                 |
| Comment:   | Lease sign by water tank. Update to current operator                                 |        |                 |
| Corrective Action:                                     |  |        | Date:           |
| Type   | TANK LABELS/PLACARDS   |        |                 |
| Comment:   | Stickers and stencils need replaced and repainted                                    |        |                 |
| Corrective Action:                                     |  |        | Date:           |
| <b>Emergency Contact Number:</b>                       |  |        |                 |
| Comment:   |  |        |                 |
| Corrective Action:                                     |  |        | Date: _____     |
| <b>Good Housekeeping:</b>                              |  |        |                 |
| Type   | DEBRIS   |        |                 |
| Comment:   | Pieces of metal panels laying around wellhead. Remove debris from location           |        |                 |
| Corrective Action:                                     |  |        | Date:           |
| Overall Good: <input type="checkbox"/>                 |  |        |                 |
| <b>Spills:</b>   |  |        |                 |
| Type   | Area   | Volume |                 |
| In Containment: No                                     |  |        |                 |
| Comment:   |  |        |                 |
| <input type="checkbox"/> Multiple Spills and Releases? |  |        |                 |
| <b>Fencing/:</b>                                       |  |        |                 |
| Type   | PUMP JACK  |        |                 |
| Comment:   | Metal panels partially installed around unit and wellhead. Remove any unused fencing |        |                 |
| Corrective Action:                                     |  |        | Date:           |
| <b>Equipment:</b>                                      |  |        |                 |
| Type: Horizontal Separator                             | # 1  |        | corrective date |
| Comment:   | HGS is 600' east of wellhead on south side of meter shed                             |        |                 |
| Corrective Action:                                     |  |        | Date:           |
| Type: Pump Jack  | # 1  |        |                 |
| Comment:   | Oilwell unit   |        |                 |

|                           |                                    |       |  |
|---------------------------|------------------------------------|-------|--|
| Corrective Action:        |                                    | Date: |  |
| Type: Gas Meter Run       | # 1                                |       |  |
| Comment:                  | Meter run is 600' east of wellhead |       |  |
| Corrective Action:        |                                    | Date: |  |
| Type: Prime Mover         | # 1                                |       |  |
| Comment:                  | Electric motor                     |       |  |
| Corrective Action:        |                                    | Date: |  |
| Type: Ancillary equipment | # 1                                |       |  |
| Comment:                  | Electric panel                     |       |  |
| Corrective Action:        |                                    | Date: |  |

**Tanks and Berms:**

| Contents           | #   | Capacity | Type     | Tank ID | SE GPS                |
|--------------------|---|----------|----------|---------|-----------------------|
| PRODUCED WATER     | 1   | 100 BBLs | Open Top |         | 37.371520,-102.240680 |
| Comment:           | Fiberglass open top water tank 600' east of wellhead. Tank is empty at time of inspection |          |          |         |                       |
| 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:           | Berms need maintenance for capacity |                     |                     |             |
| Corrective Action: |                                     |                     |                     | Date:       |

**Venting:**

|                    |    |  |       |
|--------------------|----|--|-------|
| Yes/No             | NO |  |       |
| Comment:           |    |  |       |
| Corrective Action: |    |  | Date: |

**Flaring:**

|                    |  |       |
|--------------------|--|-------|
| Type               |  |       |
| Comment:           |  |       |
| Corrective Action: |  | Date: |

**Inspected Facilities**

Facility ID: 205924 Type: WELL API Number: 009-06339 Status: PR Insp. Status: PR

**Producing Well**

Comment: [Producing. Casing production. Meter run is 600' east of wellhead on north side of water tank](#)

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