

**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:

06/28/2018

Submitted Date:

06/28/2018

Document Number:

677900644

**FIELD INSPECTION FORM**

Loc ID 324802 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: 16520  
 Name of Operator: CHEMCO INC  
 Address: 6970 SOUTH HOLLY CIR STE 206  
 City: CENTENNIAL State: CO Zip: 80112

**Findings:**  
13 Number of Comments  
0 Number of Corrective Actions  
 Corrective Action Response Requested

**Contact Information:**

Contact Name	Phone	Email	Comment
Neher, Gray	303-771-7777	bogray@msn.com	
Quint, Craig		craig.quint@state.co.us	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
212728	WELL	IJ	11/07/2014	DSPW	061-06088	H.C. WEAR #3 1	AC

**General Comment:**  
Routine UIC Inspection

**Location**

**Lease Road:**

Type	Access		
comment:	Dirt road through farm ground		
Corrective Action:			Date:

Overall Good:

**Signs/Marker:**

Type	WELLHEAD		
Comment:	Lease sign by wellhead		
Corrective Action:			Date:
Type	BATTERY		
Comment:	Lease sign at tank battery		
Corrective Action:			Date:
Type	TANK LABELS/PLACARDS		
Comment:	Stickers and stencils on tanks		
Corrective Action:			Date:

Emergency Contact Number:

Comment:			
Corrective Action:			Date: _____

Overall Good:

**Spills:**

Type	Area	Volume			

In Containment: No

Comment:

Multiple Spills and Releases?

**Equipment:**

			corrective date
Type:	Vertical Heater Treater # 0		
Comment:	Removed from location		
Corrective Action:			Date:
Type:	Ancillary equipment # 2		
Comment:	Electric panel and pump in metal shed		
Corrective Action:			Date:

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	1000 BBLS	STEEL AST		38.455040,-102.428320
Comment:					
Corrective Action:					Date:

**Paint**

Condition	
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Other (Content)	
Other (Capacity)	
Other (Type)	

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Comment: <a href="#">Shared berms</a>	Date:
Corrective Action:	Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	1	300 BBLs	STEEL AST		38.455040,-102.428320

Comment: <a href="#">Manway cover removed. (Not in use)</a>	Date:
Corrective Action:	Date:

**Paint**

Condition	
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Other (Content)	
Other (Capacity)	
Other (Type)	

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Comment: <a href="#">Shared berms</a>	Date:
Corrective Action:	Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	2	300 BBLs	STEEL AST		38.455040,-102.428320

Comment: <a href="#">2-300bbl disposal tanks</a>	Date:
Corrective Action:	Date:

**Paint**

Condition	
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Other (Content)	
Other (Capacity)	
Other (Type)	

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficent	Base Sufficient	Adequate

Comment:	Date:
Corrective Action:	Date:

**Venting:**

Yes/No	NO			
Comment:				
Corrective Action:			Date:	

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

**Inspected Facilities**

Facility ID: 212728 Type: WELL API Number: 061-06088 Status: IJ Insp. Status: AC

**Underground Injection Control**

UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: \_\_\_\_\_

UIC Routine

Inj./Tube:	Pressure or inches of Hg <u>70 PSIG</u> (e.g. 30 psig or -30" Hg)	Previous Test Pressure _____	MPP _____
TC:	Pressure or inches of Hg <u>0 PSIG</u>	Previous Test Pressure _____	Inj Zone: <u>MSSP</u>
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	Last MIT: <u>05/06/2016</u>
			AnnMTReq: <u>NO</u>

Comment: CASING WAS DEAD. TBG IJ @ 70 PSIG

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

Method of Injection: GRAVITY FEED

Test Type: \_\_\_\_\_ Tbg psi: \_\_\_\_\_ Csg psi: \_\_\_\_\_ BH psi: \_\_\_\_\_

Insp. Status: \_\_\_\_\_

Comment: \_\_\_\_\_

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
Other	Pass	Compaction	Pass			

Comment: [Location is farmed over](#)

Corrective Action:

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

**Pits:**  NO SURFACE INDICATION OF PIT